FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# OMB APPROVAL OMB Number: 32350104 Estimated average burden hours per response: 0.5

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* Pierce Valerie L   | Requiring (Month/Da  | 2. Date of Event Requiring Statement (Month/Day/Year) 03/03/2021  3. Issuer Name and Ticker or Trading Symbol NGM BIOPHARMACEUTICALS INC [ NGM ] |  |   |   |   |   |
|---|--|--|--|---|---|---|---|
| (Last) (First) (Middle) C/O NGM BIOPHARMACEUTICALS, INC.  |  |  | 4. Relationship of Reporting<br>Issuer<br>(Check all applicable)<br>Director | g Person(s) to<br>10% Owner                   |   | 5. If Amendment, Date of Original Filed (Month/Day/Year)                                      |   |
| 333 OYSTER POINT BOULEVARD  | _  |  | X Officer (give title below) SVP, GC &                                       | below)  | (Ch   | . Individual or Joint/Group Filing<br>Check Applicable Line)<br>X Form filed by One Reporting |   |
| (Street) SOUTH SAN FRANCISCO CA 94080   | _  |  | SVF, GC &  | CCO   |   | Person Form filed by More than One Reporting Person   |   |
| (City) (State) (Zip)  |  |  |  |   |   |   |   |
| Table I - Non-Derivative Securities Beneficially Owned  |  |  |  |   |   |   |   |
| 1. Title of Security (Instr. 4)   |  |  | 2. Amount of Securities<br>Beneficially Owned (Instr.<br>4)                  | 3. Owne<br>Form: D<br>(D) or In<br>(I) (Instr | oirect O                                    | 4. Nature of Indirect Beneficial<br>Ownership (Instr. 5)                                      |   |
| Common Stock  |  |  | 3,610  | D   | )   |   |   |
| Table II - Derivative Securities Beneficially Owned<br>(e.g., puts, calls, warrants, options, convertible securities) |  |  |  |   |   |   |   |
| 1. Title of Derivative Security (Instr. 4)  | 2. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |  | 3. Title and Amount of Sec<br>Underlying Derivative Sec<br>(Instr. 4)        |   | 4.<br>Conversion<br>or Exercise<br>Price of |   | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|   | Date   | Expiration   | Amount or S  |   | Derivative<br>Security                      |   | 3)  |
|   | Exercisable  | Date   | litie  | Snares  |   |   |   |

#### **Explanation of Responses:**

1. The shares subject to the option shall vest as follows: 1/4th of the shares shall vest on September 30, 2020 and 1/48th of the shares shall vest monthly thereafter, provided in each case that the Reporting Person is then providing continuous service to the issuer.

#### Remarks:

/s/ Valerie Pierce

03/10/2021

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.