FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

| Name and Address of Reporting Person* Koehler Maria | | | | | 2. Issuer Name and Ticker or Trading Symbol Ikena Oncology, Inc. [IKNA] | | | | | | (Che | elationship o eck all applic Directo | cable) | Person(s) to Iss | |
|--|--|---|--|----------------|---|---|---------|--|--------------------|--|--|--|--|---|---------------------------------------|
| (Last) | (Fi | rst) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 06/07/2024 | | | | | | Officer below) | (give title | Other (sbelow) | specify | |
| C/O IKENA ONCOLOGY, INC. 645 SUMMER STREET, SUITE 101 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line | i. Individual or Joint/Group Filing (Check Applicable ine) Form filed by One Reporting Person | | | |
| (Street) BOSTO | N M | A | 02210 | | Dulo | 10h5 | 1(0) | Transac | ation Ind | iontion | | Form fi Person | | than One Repo | rting |
| (City) | (Si | tate) | (Zip) | | Che | ck this box | to indi | | saction was m | nade pursua | | | n or written pla | an that is intende | i to |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | Execution Date | | r, Transaction Disposed Code (Instr. 5) | | ities Acquired (A) or d Of (D) (Instr. 3, 4 and | | 5. Amour Securitie Beneficia Owned F | s Form ally (D) collowing (I) (II | orm: Direct | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code V | Amount | (A) or (D) | Price | Transact (Instr. 3 a | ion(s) | | (Instr. 4) | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year | 3A. Deemed Execution Date, if any (Month/Day/Year | Coc | nsaction le (Instr. | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title am of Securit Underlyin Derivative (Instr. 3 ar | ies g Security | 8. Price of Derivative Security (Instr. 5) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | Cod | le V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Stock Option (Right to Buy) | \$1.75 | 06/07/2024 | | A | | 17,520 | | (1) | 06/06/2034 | Common Stock | 17,520 | \$0.00 | 17,520 | D | |

Explanation of Responses:

1. This option shall vest in full upon the earlier of (i) June 7, 2025 or (ii) the date of the next annual meeting; provided, however, that all vesting shall cease if the director resigns from the Board or otherwise ceases to serve as a director.

/s/ Mark Manfredi, as Attorneyin-Fact for Maria Koehler 06/10/2024

** Signature of Reporting Person Date

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

- * If the form is filed by more than one reporting person, see Instruction 4 (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.