FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

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 A		ng Statement Day/Year)	3. Issuer Name and Ticker or Trading Symbol Ikena Oncology, Inc. [IKNA]								
	(First) (Middle) NA ONCOLOGY, INC.			021	Issuer	ck all applicable) Director	10% O	wner File	5. If Amendment, Date of Original Filed (Month/Day/Year) 03/25/2021		
(Street) BOSTON MA 02210		1		X	Officer (give title below) Chief Medica	Other (below) al Officer	6. I (Ct	Individual or Joint/Group Filing Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)							reporting r	Cison	
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4) 3. Owne Form: D (D) or In (I) (Instr		rect Ownership (Instr. 5)				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
Exp (Mc			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Secu Underlying Derivative Secu (Instr. 4)			4. Conversion or Exercise Price of	5. Ownership Form:	6. Nature of Indirect Beneficial	
			Date Exercisable	Expiration Date	Title		Amount or Number of Shares		Direct (D) or Indirect (I) (Instr. 5)	Ownership (Instr. 5)	
Stock Optio	n (Right to Bu	y)	(1)	07/22/2030	Cor	nmon Stock	157,711 ⁽²⁾	4.51	D		

Explanation of Responses:

- 1. 25% of this option shall vest and become exercisable on July 1, 2021, with the remainder vesting in 36 substantially equal monthly installments thereafter.
- 2. Due to an administrative error, the Form 3 filed by the Reporting Person on March 25, 2021 (the "Original Form 3") included an incorrect amount of underlying securities in the first row of Table II, Column 3 (1,128,862). This Form 3/A amends the Original Form 3 to correct this error, and does not impact any other holdings reported on the Original Form 3

Remarks:

/s/ Douglas R. Carlson, Attorney-in-Fact

03/30/2021

OMB APPROVAL

** 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 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.