FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Vashing | ton. D |).C. 2 | 20549 |
|---------|--------|--------|-------|

| STATEMENT OF CHANGES IN I | 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

| 1. Name and Address of Reporting Person* Marango Jotin | | | | 2. Issuer Name and Ticker or Trading Symbol Ikena Oncology, Inc. [IKNA] | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specif | | | | | |
|--|--|---|--------------------------------|---|---|--------------|--|------------------------------|---|--|--|--|---------------------------------------|----------------------|------------|
| (Last) | ` | irst) LOGY, INC. | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 02/01/2024 | | | | | X | below) | | Other (below) | specify | |
| 645 SUMMER STREET, SUITE 101 | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | Line) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) | N M | IA | 02210 | | | | | | | | X | | ed by More t | teporting Personanth | - 1 |
| (City) | (S | tate) | (Zip) | F | ☐ Che | ck this box | to indi | Transac | saction was m | nade pursua | nt to a contrac | et, instruction | or written plan | that is intended | to satisfy |
| | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | | | |
| | | Та | ble I - Non-D | erivati | ve Se | curitie | s Ac | quired, D | isposed c | of, or Be | neficially | Owned | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | te | action 2A. Deemed Execution Date if any (Month/Day/Yea | | Code (Instr. | | ed (A) or str. 3, 4 and 5 | 5. Amoun Securities Beneficia Owned Fo | Form (D) or ollowing (I) (In: | . Ownership orm: Direct D) or Indirect) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | Code V | Amount | (A) o (D) | r Price | Transacti (Instr. 3 a | on(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 (Instr. 3) Price of Derivative Security (Month/Day/Year) | | 3A. Deemed Execution Date, if any (Month/Day/Year) | Date, Transaction Code (Instr. | | n Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4) | | ies g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | 1(9) | |
| Stock Option (Right to Buy) | \$1.36 | 02/01/2024 | | A | | 181,000 | | (1) | 02/01/2034 | Common Stock | 181,000 | \$0.00 | 181,000 | D | |

Explanation of Responses:

1. 25% of the shares subject to this option shall vest and become exercisable on January 1, 2025, with the remainder vesting in 36 substantially equal monthly installments thereafter.

/s/ Mark Manfredi, as Attorney-02/02/2024 in-Fact for Jotin Marango

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).