FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFI	CIAL OWNE	RSHIP

l	OMB APPROVAL									
l	OMB Number:	3235-0287								
l	Estimated average burd	len								
l	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* <u>Fardis Maria</u>				<u>IO</u>	2. Issuer Name and Ticker or Trading Symbol IOVANCE BIOTHERAPEUTICS, INC. IOVA								(Ch	5. Relationship of Report (Check all applicable) X Director		10% (Owner		
(Last) (First) (Middle) 999 SKYWAY ROAD, SUITE 150					3. Date of Earliest Transaction (Month/Day/Year) 11/01/2019										Officer (give title below) Other (specify below) President and CEO				
(Street) SAN CA (City)	SAN CARLOS CA 94070				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	e) <mark>X</mark> Fori Fori	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acqui Disposed Of (D) (In 5)				Secu	ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount (A) or (D)		or	Price	Trans	action(s) . 3 and 4)		(Instr. 4)		
Common Stock 11/01/				/2019	2019		F		1,894 ⁽¹	l)]	D	\$21.9	7 31	10,147 ⁽²⁾	D				
Common Stock 12/02/				/2019	2019		F		1,894(1	1)]	D	\$22.6	6 30	08,253(2)	D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execution			ransaction ode (Instr.		ı of E		6. Date Exercisal Expiration Date (Month/Day/Year		e Amount of		S (I	. Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Nun of Sha						

Explanation of Responses:

1. Exempt transaction pursuant to Section 16(b) and the rules thereunder. All of the shares reported as disposed of in this Form 4 were automatically withheld by the Issuer in accordance with the terms of the grant of the Restricted Stock Units ("RSUs") dated June 1, 2016, to satisfy federal and state tax withholding and payment obligations resulting from the vesting and settlement of RSUs. The Reporting Person did not receive or sell any of the shares reported on this Form 4 item; these shares were withheld and subsequently canceled by the Issuer in accordance with the foregoing. The grant of the RSUs was previously reported in Table I of the Reporting Person's initial Form 4 reporting the acquisition of common stock pursuant to the June 1, 2016 grant.

2. Shares reported include unvested Restricted Stock Units ("RSUs").

Remarks

Pursuant to the SEC Form 4 filing limitation of 30 transactions per form, two Forms 4 are being filed and each shall be deemed to be part of the same Form 4 filing. This is 2 of 2 Forms 4.

/s/ Maria Fardis

12/04/2019

** 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.