SEC For			· · · ·						_									
FORM 4 UNITED S) STAT	TATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549											OMB APPROVAL		
Section 16. Form 4 or Form 5 obligations may continue. See					NT OF CHANGES IN BENEFICIAL OWNERSHIP									OMB Number: 3235-0287 Estimated average burden hours per response: 0.5				
1. Name and Address of Reporting Person [*] Rothbaum Wayne P.					2. Issuer Name and Ticker or Trading Symbol <u>IOVANCE BIOTHERAPEUTICS, INC.</u> [IOVA]								eck all applic	able) r	10%		wner	
(Last) C/O IOV	(Last) (First) (M C/O IOVANCE BIOTHERAPEUTICS				3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024									(give title		Other (: below)	specity	
825 IND	825 INDUSTRIAL ROAD, 4TH FLOOR				4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) SAN CA	RLOS C	OS CA 94070												Form filed by More than One Reporting Person				
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication 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 - Nor	n-Deriva	tive S	Securities	s Ac	quired, C	Disp	oosed c	of, or Be	neficially	/ Owned					
Date				2. Transac Date (Month/Da	Execution Date,			Transaction Disposed		ities Acquired (A) or d Of (D) (Instr. 3, 4 and 5)		Beneficially Owned Following		Form: Direct		7. Nature of Indirect Beneficial Ownership		
							Code N	v	Amount	(A) o (D)	r Price	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)		
			Table II -					uired, Dis s, options					Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/ [\]	ate, Tran Code	sactior e (Instr	Derivativ Securitie Acquired or Dispo of (D) (In	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title an of Securit Underlyin Derivative (Instr. 3 an	g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	e V	(A)	(D)	Date Exercisable		xpiration	Title	Amount or Number of Shares		(Instr. 4)				
Deferred Restricted	(1)	03/01/2024		А		100,000		(2)	Γ	(2)	Common Stock	100,000	\$0	100,0	000	D		

Explanation of Responses:

Stock Unit

1. Each deferred restricted stock unit ("DRSU") represents a contingent right to receive one share of the Issuer's common stock and are granted pursuant to the Issuer's 2018 Equity Incentive Plan (as amended). 2. 50% of the RSUs will vest on the 6-month aniversary of the date of grant and the remaining RSUs will vest on the one-year anniversary of the date of grant. Notwithstanding the vesting, the issuance of the common stock will be deferred until the earlier of (i) three months after the Reported Person's resignation or removal from the Board of Directors or no longer providing service because of death or disability, (ii) a change in control (as defined in the DRSU agreement) or (iii) ten years from the Transaction Date.

/s/ Wayne P.Rothbaum	03/0
** Signature of Reporting Person	Date

Signature of Reporting Person

05/2024

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.