FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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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* GRAF FINCKENSTEIN FRIEDRICH					<u>IO</u>	2. Issuer Name and Ticker or Trading Symbol IOVANCE BIOTHERAPEUTICS, INC. [IOVA]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify					
(Last) (First) (Middle) C/O IOVANCE BIOTHERAPEUTICS, INC. 825 INDUSTRIAL ROAD, 4TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 06/14/2022									below) below) Chief Medical Officer						
(Street) SAN CARLOS CA 94070 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable Line) X 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. Transa Date (Month/D				action	2A. Deemed Execution Da		ed Date,	3. Transa Code (I	3. 4. Transaction Di Code (Instr. 5)		Securities Acquired (A) isposed Of (D) (Instr. 3,			5. Amou Securitie Benefici	nt of es ally Following	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		(A) or (D)	Price	Transact	tion(s)			(111511.4)	
Common Stock ⁽¹⁾ 06/14/					4/202	/2022		М		19,690		A	\$0	19	,690	D				
Common Stock ⁽²⁾ 06/14/					4/202	·/2022		F		6,809		D	\$7.73	12,881(3)		D				
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 Da if any (Month/Day/Y	Date,	4. Transa Code (I 8)		of		6. Date Ex Expiration (Month/Da		of Securities			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dire or I (I) (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	O N O	lumber						
Restricted Stock Units ⁽⁴⁾	(5)	06/14/2022			A		19,690		(6)		(6)	Comi		.9,690	\$0.00	19,690		D		

Explanation of Responses:

- 1. This is the first vesting of the restricted stock units issued on June 14, 2021.
- 2. Represents shares withheld by the Issuer to satisfy the mandatory tax withholding requirements upon vesting of restricted stock units. This is not an open market sale of securities.
- 3. Represents the common stock remaining after deducting the common stock withheld for taxes.
- 4. Represents restricted stock units remaining after deducting the vested shares of common stock and the common stock withheld for taxes as set forth in Table I above.
- 5. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.
- 6. Provided the Reporting Person is still employed with the Issuer on December 31, 2022, the remaining restricted stock units shall vest and be settled on such date.

/s/ Friedrich Graf Finckenstein 06/16/2022

** 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.