FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF	CHANGES	IN BENEFIC	CIAL	OWNERS	SHIP

OMB APPROVAL								
OMB Number: 3235-02								
Estimated average bi	urden							
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).

	tion 1(b).	nue. 366		File	ed pu o	rsuant or Sect	t to Section tion 30(h)	n 16(a of the	a) of the Se Investmen	curiti t Con	es Exchan	ige Act of 1 of 1940	1934		nours	per res	ponse:	0.5
1. Name and Address of Reporting Person*  GRAF FINCKENSTEIN FRIEDRICH				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 (speci			mer			
(Last) (First) (Middle) C/O IOVANCE BIOTHERAPEUTICS, INC. 999 SKYWAY ROAD, SUITE 150			3. Date of Earliest Transaction (Month/Day/Year) 01/04/2021								Chief Medical Officer							
(Street) SAN CA (City)		A State)	94070 (Zip)		4.	Line) X Form filed by							ed by One	nt/Group Filing (Check Applicable od by One Reporting Person od by More than One Reporting				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  1. Title of Security (Instr. 3)  2. Transaction  2. Transaction  2. Transaction  2. Deemed  3. 4. Securities Acquired (A) or  5. Amount of  6. Ownership  7. Nature of																		
Date (Month				n/Day/Year)		Execution Date, if any (Month/Day/Yea		Code (I		Amount (A) or D			Beneficia Owned For Reported Transacti	ollowing (D) con(s)		Indirect E str. 4)	Indirect Beneficial Ownership (Instr. 4)	
			Table II - I							ispo	sed of,		eficially (	(Instr. 3 a	nd 4)			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Date Execution D		Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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)	
				C	ode	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amount or Number of Shares		(Instr. 4)	on(a)		
Stock Option (right to	\$46.26	01/04/2021			A		100,000		(1)	0	1/04/2031	Common Stock	100,000	\$0	100,00	00	D	

## **Explanation of Responses:**

1. Provided the Reporting Person is still employed with the Issuer on the following dates, the options are exercisable as follows: (i) options for the purchase of one-third of such shares shall vest on the one-year anniversary of the date of grant; and (ii) the remaining options shall vest in eight equal quarterly installments over the next two years, commencing with the first quarter following the first anniversary of the date of grant.

/s/ Friedrich Graf Finckenstein 01/06/2021

\*\* 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.