FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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						2. Issuer Name and Ticker or Trading Symbol IOVANCE BIOTHERAPEUTICS, INC. [IOVA]										eck all applic Directo	cable)	ng Person(s) to Issu 10% Owr Other (sp		vner	
(Last)	ist) (First) (Middle) O IOVANCE BIOTHERAPEUTICS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 01/16/2024										below) Chief Medical O				
825 IND	USTRIAL	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) SAN CA	AN CARLOS CA 94070					X Form filed by One Reporting Person 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.																
		Tab	le I - Nor	n-Deriv	ative	Sec	uriti	ies Ac	qui	ired, D	isp	osed c	of, or B	ene	ficial	y Owned	k				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Date			Transaction Dispos Code (Instr. 5)		Dispose	rities Acquired (A) or ed Of (D) (Instr. 3, 4 an			5. Amou Securitie Benefici Owned F Reporte	es ally Following	Form (D) o	n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership		
						ď	Code V	,	Amount	(A) (D)	or	Price	Transact (Instr. 3	tion(s)			(Instr. 4)				
Common	5/2024	4				M		2,813	3 A S		\$ <mark>0</mark>	35,184		D							
Common	Stock(2)			01/16	5/2024	4				F		1,577	7 E		\$8.37	33,6	507(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. Deeme Execution if any (Month/Da	Date,	4. Transa Code (8)		n of		Expi	Date Exerc piration D onth/Day/	ate		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		1)	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e ercisable		xpiration ate	Title	or Nu of	umber						
Restricted Stock Units	(4)	01/16/2024			M			2,813		(5)		(5)	Common	2	.,813	\$0.00	11,251	1	D		

Explanation of Responses:

- 1. Represents such shares underlying the restricted stock units ("RSUs") which vested on the transaction date.
- 2. Represents shares withheld by the Issuer to satisfy the mandatory tax withholding requirements upon vesting of the RSUs. This is not an open market sale of securities.
- 3. Represents the common stock remaining after deducting the common stock withheld for taxes.
- 4. Each RSU represents a contingent right to receive one share of the Issuer's common stock.
- 5. The remaining RSUs will vest in equal quarterly installments.

/s/ Friedrich Graf Finckenstein 01/18/2024

** Signature of Reporting Person

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.