FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

		00540
Vashington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL						
OMB Number:	3235-0287						
Estimated average burden							
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

Name and Address of Reporting Person* Vogt Frederick G (Last) (First) (Middle)						VA] vA] ate o	NCI f Earli	E BIO	TH	or Tradin IERAI ion (Mon	E	UTICS	(Ch	Direct Office below	cable) or (give title		son(s) to Is: 10% Ov Other (s below) eral Coun	Owner (specify			
C/O IOVANCE BIOTHERAPEUTICS, INC. 825 INDUSTRIAL ROAD, 4TH FLOOR					-	07/14/2023 4. If Amendment, Date of Original Filed (Month/Day/Year)										Interim CEO & General Counsel 6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAN 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 - No	n-Deriv	ative	Sec	curit	ies Ac	qui	ired, D	isp	osed o	of, or E	ene	eficial	ly Owne	d				
Date			2. Transa Date (Month/E	Day/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		, Τι C	Transaction Dispose Code (Instr. 5)		ities Acq d Of (D) (Benefic Owned	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code	,	Amount	(A) (D)		Price	Reporte Transac (Instr. 3	tion(s)				
Common Stock ⁽¹⁾ 07/1				07/14	2023				M		20,83	34 A		\$ <mark>0</mark>	81,701			D			
Common	Stock ⁽²⁾			07/14	/2023					F		8,85	1 I)	\$7.76	\$7.76 72,850 ⁽³⁾ D					
		Т		Deriva (e.g., p												Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	n Date,	4. Transac Code (Ir 8)				Exp	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title a Amount Securiti Underly Derivati (Instr. 3	of es ing we Se and	4)	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly [10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	te ercisable		xpiration ate	Title	OI N	umber						
Restricted Stock Units	(4)	07/14/2023			М			20,834		(5)		(5)	Common	2	0,834	\$0.00	125,00	7	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 restricted stock units. This is not an open market sale of securities.
- 3. Represents common stock remaining after deducting the common stock withheld for taxes.
- $4.\ Each\ restricted\ stock\ unit\ represents\ a\ contingent\ right\ to\ receive\ one\ share\ of\ the\ Issuer's\ common\ stock.$
- 5. The remaining RSUs will vest in six equal quarterly installments.

<u>/s/ Frederick G. Vogt</u> <u>07/17/2023</u>

** 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.