FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL									
OMB Number: 3235-0362									
Estimated average burden									
hours nor response	. 10								

Form 3 Holdings Reported.

Form 4	1 Transactions	Reported.	Filed	d pursuant to S or Section 3														
1. Name and Address of Reporting Person* MCPEAK MERRILL A			2. Issuer Name and Ticker or Trading Symbol IOVANCE BIOTHERAPEUTICS, INC. [IOVA]						(Che	eck all app	blicable) ctor			Owner				
(Last) (First) (Middle) C/O IOVANCE BIOTHERAPEUTICS, INC. 825 INDUSTRIAL ROAD, 4TH FLOOR				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2021							belov	er (give titl w)	e 	Oth belo	er (specify w)			
(Street) SAN CA (City)	IRLOS CA		04070 Zip)	4. If Amend	ment	, Date o	of Orig	jinal File	d (Month	/Day/Y	ear)	Line) K Form	n filed by C	ne Re	porting P		
		Table	I - Non-Deriva	ative Secu	ritie	s Acc	quire	d, Dis	posed	of, o	r Bene	ficia	lly Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Disposit Of (D) (Instr. 3, 4 and 5)			Securit Benefic		ies Own		ership : Direct	7. Nature of Indirect Beneficial Ownership				
			(Month/Day/Year)		8)		Amour	t	(A) or (D)			Issuer's			ct (I)	(Instr. 4)		
Common Stock		01/08/2021		G		r	37,	800	D	(1)	(1)		418,783		D			
		Ta	ble II - Derivat (e.g., pı	ive Securit uts, calls, v									y Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deri Sec Acq (A) (Disp of (I	oosed D) tr. 3, 4	Expi	6. Date Exercisable and Expiration Date (Month/Day/Year)		ration Date tht/Day/Year) Amount o Securities Underlyin Derivative Security (3 and 4) Am or Nu Expiration		nount of ecurities aderlying erivative ecurity (Ins and 4) Amount or Number 1	str.	8. Price of Derivative Security (Instr. 5) Benefic Owned Followin Reporte Transac (Instr. 4)		e s ally g	10. Owners Form: Direct (I or Indire (I) (Instr	Benefici Ownersi ct (Instr. 4)

Explanation of Responses:

1. Shares transferred as a bona fide gift without any consideration.

/s/ Merrill A. McPeak

01/19/2022

** 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.