FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPR	OVAL				
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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

Name and Address of Reporting Person* Maynard Ryan D			<u>IO'</u>	2. Issuer Name and Ticker or Trading Symbol IOVANCE BIOTHERAPEUTICS, INC. [IOVA]							[(Ch	eck all appli X Directo	or	g Perso	10% Ow	ner		
(Last) C/O IOV	•	irst) OTHERAPEUTI	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/06/2023									Officer (give title below)		Other (s below)	pecify
825 INDUSTRIAL ROAD, 4TH FLOOR				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	ARLOS C	A	94070												iled by One iled by More	•	J	
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication												
									icate that a tra defense cond						ion or written	plan th	at is intende	d to
		Tabl	le I - Noi	า-Deriv	ative	Sec	curities	Ac	quired, D	ispose	d of	f, or Be	neficial	ly Owne	d			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				r) E	A. Deeme xecution any Month/Day	Date,	3. Transaction Code (Instr. 8) 4. Securities Acqu Disposed Of (D) (I 5)				Securition Benefici	5. Amount of Securities Beneficially Owned Following		Direct Control of the	7. Nature of Indirect Beneficial Ownership			
							Code	/ Amo	Amount (A) or (D)		r Price	Reporte Transac (Instr. 3	orted saction(s) tr. 3 and 4)			(Instr. 4)		
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		3A. Deemed Execution Date if any (Month/Day/Ye	Date,	Code (Inst				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) (Instr. 4)	ly C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Expiration Date		Title	Amount or Number of Shares					
Deferred Restricted Stock Unit	(1)	06/06/2023			A		51,955		(2)	(2)		Common Stock	51,955	\$0	51,955		D	

Explanation of Responses:

- 1. Each deferred restricted stock unit ("DRSU") represents a contingent right to receive one share of the Issuer's common stock and are granted pursuant to the Issuer's 2018 Equity Incentive Plan (as
- 2. Provided the Reporting Person continues to be providing service to the Issuer on the following dates, the DRSUs shall vest on the earlier of: (i) the first anniversary of the Transaction Date; or (2) the day prior to the Issuer's next annual shareholder meeting. Notwithstanding the vesting, the issuance of the common stock will be deferred until the earlier of (i) three months after the Reported Person's resignation or removal from the Board of Directors or no longer providing service because of death or disability, (ii) a change in control (as defined in the DRSU agreement) or (iii) ten years from the Transaction Date.

/s/ Ryan Maynard

06/08/2023

** 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.