FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 OMB Number: 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

1. Name and Address of Reporting Person* GRAF FINCKENSTEIN FRIEDRICH						2. Issuer Name and Ticker or Trading Symbol IOVANCE BIOTHERAPEUTICS, INC. [IOVA]										eck all app Dire	ionship of Reporting all applicable) Director Officer (give title below) Chief Medic		Person(s) to Issuer 10% Owner Other (specif		
(Last) (First) (Middle) C/O IOVANCE BIOTHERAPEUTICS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 07/15/2024													below)		
825 INDUSTRIAL ROAD, 4TH FLOOR						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAN CARLOS CA 94070																	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)					Ru	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.														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		,	Transaction D Code (Instr. 5		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				Secur Benef Owne	cially I Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
										Code	v	Amount	(A)	or	Price		ted action(s) 3 and 4)			(Instr. 4)	
Common Stock ⁽¹⁾ 07/15/						-				M		2,813	3 .	4	\$0		47,299		D		
Common Stock ⁽²⁾ 07/15/2					5/2024	1				F		1,428	3 1)	\$8.68	3 4:	45,871(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,		ransaction code (Instr.		of I		Date Exe piration I onth/Day	Date		Amoun Securit Underly Derivat	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title	1	Amount or Number of Shares						
Restricted Stock Units	(4)	07/15/2024			M			2,813		(5)		(5)	Commo	n	2,813	\$0.00	5,626	(6)	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.
- 6. Such aggregate number reflects the remainder of such RSUs granted on January 14, 2022, but does not include any other RSUs held by such Reporting Person.

/s/ Friedrich Graf Finckenstein 07/17/2024

** 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.