FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|-------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

|  | OMB APPROVAL                                     |     |  |  |  |  |  |  |  |
|--|--|-----|--|--|--|--|--|--|--|
|  | OMB Number: 3235-029<br>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*  Maynard Ryan D                       |  |                       |                      | <u>IC</u>  | 2. Issuer Name and Ticker or Trading Symbol  IOVANCE BIOTHERAPEUTICS, INC. [ IOVA ] |           |  |                     |        |                          |  | neck all app   | icable)<br>or      | ng Pers  | son(s) to Iss<br>10% Ov  |           |  |
|--|--|-----------------------|----------------------|--|---|-----------|--|---------------------|--------|--------------------------|--|--|--------------------|--|--|-----------|--|
| (Last)   | `  | irst)<br>OTHERAPEUTIO | (Middle)             |  | 3. Date of Earliest Transaction (Month/Day/Year) 06/29/2021                         |           |  |                     |        |                          | _  | Office<br>belov  | r (give title<br>) |  | Other (s<br>below)   | specify   |  |
| 999 SKYWAY ROAD, SUITE 150   |  |                       |                      | 4  | If Amendment, Date of Original Filed (Month/Day/Year)                               |           |  |                     |        |                          | 6  | 6. Individual or Joint/Group Filing (Check Applicable  |                    |  |  |           |  |
| (Street) SAN CA  | RLOS C.  | A                     | 94070                | _  | 4. If Americanient, Sate of Original Fried (Monta #24), Tear)                       |           |  |                     |        | Lir                      | e)<br>X Form<br>Form                       | Form filed by One Reporting Person Form filed by More than One Reporting Person  |                    |  |  |           |  |
| (City)   | (S   | tate)                 | (Zip)                |  |   |           |  |                     |        |                          |  |  |                    |  |  |           |  |
|  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |                       |                      |  |   |           |  |                     |        |                          |  |  |                    |  |  |           |  |
| Date   |  |                       | nsactior<br>:h/Day/Y | action 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |   | Code (Ins | Transaction Disposed Of (D) (Instr. 3, 4   |                     |        | ed (A) or<br>tr. 3, 4 an | Benefic                                    | es Form<br>ally (D) of<br>following (I) (II  |                    | m: Direct<br>or Indirect<br>Instr. 4)                                    | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |           |  |
|  |  |                       |                      |  |   |           | Code   | ,                   | Amount | nount (A) or (D)         |  | Transa<br>(Instr. 3  | ction(s)           |  |  | (11341.4) |  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |                       |                      |  |   |           |  |                     |        |                          |  |  |                    |  |  |           |  |
| Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any |  |                       |                      | nsaction of  |   |           | 6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Am of Securities Underlying Derivative Sectionstr. 3 and 4) |                     |        | ies<br>g<br>Security     | 8. Price of Derivative Security (Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) |                    | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |           |  |
|  |  |                       |                      | Code   | v   | (A)       | (D)  | Date<br>Exercisable |        | opiration                | Title                                      | Amount<br>or<br>Number<br>of<br>Shares   |                    |  |  |           |  |
| Stock<br>Option<br>(right to<br>buy)   | \$26.33  | 06/29/2021            |                      | A  |   | 35,000    |  | (1)                 | 06     | 6/29/2031                | Common<br>Stock                            | 35,000   | \$0                | 35,00  | 00   | D         |  |

## **Explanation of Responses:**

1. These options are exercisable in four equal quarterly installments of 8,750 each following the date of grant, such that the options will be fully vested and exercisable on June 29, 2022.

<u>/s/ Ryan Maynard</u> <u>07/01/2021</u>

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.