FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

| STATEMENT (| OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-------------|------------|---------------|------------------|
| | | | |

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| 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* Desmarais William | | | | | 2. Issuer Name and Ticker or Trading Symbol TScan Therapeutics, Inc. [TCRX] | | | | | (Ch | elationship of eck all applic Directo | able) r | 10 | % Owr | ier | |
|--|---|--|--|------|---|---------------------------------|---|--------------------------|---|---|--|---|---|--|-------|------|
| | ` | APEUTICS, INC | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 07/25/2022 | | | | | | | X Officer (give title below) Other (specibelow) Chief Business Officer | | | | Cony |
| (Street) WALTHA | | | 02451 (Zip) | 4 | . If Ame | endment, I | Date o | of Original File | ed (Month/Da | ay/Year) | Line | X Form fi | led by One led by More | Filing (Cheon Reporting For than One I | erson | |
| (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Tr | | . Transacti | action 2A. Deemed Execution Date, | | 3. Transactio | 4. Securi Disposed tr. 5) | Securities Acquired (A) or (A) or (A) or | | 5. Amour Securitie Beneficia Owned F Reported Transact | 5. Amount of Securities Beneficially (D) Owned Following Reported Transaction(s) (Instr. 3 and 4) | | of ct B | Nature f Indirect eneficial wnership nstr. 4) | | | |
| | | ٦ | Table II - De | | | | | uired, Dis , options, | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Dat if any (Month/Day/Ye | Code | 4. 5. Number of Code (Instr. Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4) | | ies g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Owne Form: Direct or Ind (I) (Ins | (D) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Stock Option (Right to Buy) | \$3.27 | 07/25/2022 | | A | | 30,000 | | (1) | 07/24/2032 | Voting Common Stock | 30,000 | \$0.00 | 30,000 | г | | |

Explanation of Responses:

1. The shares subject to this option vest over 4 years of service following July 25, 2022, with 25% vesting upon completion of 1 year of continuous service to the Issuer and the balance vesting in 36 equal monthly installments thereafter.

Remarks:

/s/ William Desmarais

07/27/2022

** 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.