SEC Foi	rm 4																			
FORM 4 UNITED STA				O STAT	TES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549											OMB APPROVAL				
Section 16. Form 4 or Form 5 obligations may continue. See					NT OF CHANGES IN BENEFICIAL OWNE ad pursuant to Section 16(a) of the Securities Exchange Act of 1934									IIP	Estim	OMB Number: 32: Estimated average burden hours per response:		3235-0287 n 0.5		
1. Name and Address of Reporting Person* MacBeath Gavin					or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>TScan Therapeutics, Inc.</u> [ TCRX ]									ationship of k all applica Director		Reporting Person(s) to Issuer le) 10% Owner				
(Last) (First) (Middle) C/O TSCAN THERAPEUTICS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 06/13/2023								X	below)		title Other (spec below) Executive Officer		specify		
830 WINTER STREET (Street) WALTHAM MA 02451					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line) X	,						
(City) (State) (Zip)						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.														
1. Title of Security (Instr. 3) 2. Trans. Date				2. Transac	tion	2A. Deem Execution if any	A. Deemed Execution Date,		isp ion str.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		A) or	5. Amount	ly	Form	Direct	7. Nature of Indirect Beneficial Ownership			
					(			v	Amoun	it (A) (D)	or	Price	Reported Transaction(s) (Instr. 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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun Securities Underlyi Derivative Security (Instr. 3 and 4)		erlying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Ex Da	piration te	Title		ount or ber of res		(Instr. 4)					
Stock Option (Right to	\$2.49	06/13/2023		A		1,121,300		(1)	06/	/12/2033	Voting Common Stock	1,12	21,300	<b>\$0.00</b>	1,121,	300	D			

## Explanation of Responses:

1. 536,300 shares subject to this option shall vest and become exercisable with respect to 25% of the shares on the one-year anniversary of May 24, 2023, with the balance vesting thereafter in equal monthly installments over the next 36 months of continuous service to the Issuer. The remaining 585,000 shares subject to this option shall vest and become exercisable with respect to 25% of the shares on February 2, 2025, with the balance vesting thereafter in equal monthly installments over the next 36 months of continuous service to the Issuer, in each case subject to the Reporting Person's continued service at such time. This option was granted on May 24, 2023 subject to the approval of the Issuers' stockholders of an amendment to the TScan Therapeutics, Inc. 2021 Equity Incentive Plan, which was obtained on June 13, 2023.

## **Remarks:**

Buy)

## /s/ Gavin MacBeath

\*\* Signature of Reporting Person

06/15/2023 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.