SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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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 [*] Silver Brian M.	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 07/15/2021 3. Issuer Name and Ticker or Trading Symbol TScan Therapeutics, Inc. [TCRX]					
(Last) (First) (Middle) C/O TSCAN THERAPEUTICS, INC. 830 WINTER STREET (Street) WALTHAM MA 02451 (City) (State) (Zip)	_		4. Relationship of Reporting Issuer (Check all applicable) Director X Officer (give title below) Chief Financial	10% O Other (below)	wner 6. (specify (C	led (Month/Day/ Individual or Jo Check Applicable X Form filed I Person	int/Group Filing Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned							
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)			lature of Indirect Beneficial nership (Instr. 5)	
Table II - Derivative Securities Beneficially Owned(e.g., puts, calls, warrants, options, convertible securities)							
1. Title of Derivative Security (Instr. 4) Expiration Date (Month/Day/Year)		ate	3. Title and Amount of Se Underlying Derivative Sec (Instr. 4)		4. Conversion or Exercise	cise Form:	6. Nature of Indirect Beneficial Ownership (Instr.
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)
Stock Option (right to buy)	(1)	01/26/2031	Voting Common Stock	48,780	5.82	D	

Explanation of Responses:

1. The shares subject to this option vest over 4 years of service following December 14, 2020, 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/ Brian M. Silver

07/15/2021

** 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 5 (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.