## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL							
	OMB Number:	3235-0287						
	Estimated average b	urden						
- 1	l .							

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*  ZDRAVESKI ZORAN					2. Issuer Name <b>and</b> Ticker or Trading Symbol TScan Therapeutics, Inc. [ TCRX ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify					
(Last) (First) (Middle) C/O TSCAN THERAPEUTICS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 06/13/2023							below)	er (give title v) Chief Legal (		below)	ресіту
830 WINTER STREET				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	AM M	[A	02451										X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	(S	tate)	(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.											
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,		Code (Instr. 5)			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	V Amoun	t (A)		Transact (Instr. 3 a	tion(s)				
									uired, Dis s, 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 Date, if any (Month/Day/Year	Code (Instr.					6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	i i illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			
Stock Option (Right to Buy)	\$2.49	06/13/2023			A		430,000		(1)	06/12/2033	Voting Commor Stock	430,000	\$0.00	430,000		D	

## **Explanation of Responses:**

1. 220,000 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 210,000 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:

/s/ Zoran Zdraveski

06/15/2023

\*\* 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.