## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasiiiigtoii,	D.C.	20349

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:							

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* <u>Brennan John Owen</u>				2. Issuer Name and Ticker or Trading Symbol ImmunityBio, Inc. [ IBRX ]							(Che	elationship o eck all applic	able)	g Pers	on(s) to Issu 10% Ow			
(Last)	`	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/13/2023								Officer below)	Officer (give title below)		Other (specification)	pecify
C/O IMMUNITYBIO, INC. 3530 JOHN HOPKINS COURT					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					
(Street)	reet) AN DIEGO CA 92121													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.							to					
		Tal	ole I - Non	-Deriv	/ative	Se	curities	s Ac	quired, D	ispose	d of, d	or Be	neficiall	y Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Dat		Date,	Code (Instr. 5)		Acquii (D) (In	red (A) or str. 3, 4 and	Beneficia Owned F	s ally following	Form	orm: Direct  o) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	V Amo	unt	(A) c (D)	Price	Reported Transact (Instr. 3 a	ion(s)		(	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 (Instr. 3)  Brice of Derivative Security  3. Transaction Date (Month/Day/Year)		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		Derivative E		6. Date Exercisable and Expiration Date (Month/Day/Year)		of S Und Der	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 Transaction(s)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercisable	Expiration Date	on Titl	e	Amount or Number of Shares		(Instr. 4)	J.1(3)		
Stock Option (right to buy)	\$2.99	06/13/2023			A		158,263		(1)	06/13/20		mmon tock	158,263	\$0	158,26	3	D	

#### **Explanation of Responses:**

1. Subject to the reporting person's continuing to be a Service Provider (as defined in the 2015 Equity Incentive Plan) through such applicable vesting date, one hundred percent (100%) of the shares subject to the award will vest on the earlier to occur of June 13, 2024 or the date immediately preceding the next annual meeting of stockholders.

## Remarks:

<u>/s/ Jason Liljestrom, as</u> <u>Attorney-in-Fact</u> <u>06/15/2023</u>

\*\* 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.