UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 * ROSENWALD LINDSAY A MD				2. Issuer Name and Ticker or Trading Symbol MUSTANG BIO, INC. [MBIO]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director 10% Owner					
(Last) (First) (Middle) 377 PLANTATION STREET				3. Date of Earliest Transaction (Month/Day/Year) 07/14/2020					-	Office	r (give title belo	ow)	Other (specify be	elow)	
(Street) WORCESTER, MA 01605			4. I	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	<u> </u>				Table I - Non-Derivative Securities Acqu						nired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Y	ear) Exe	Deemed ecution Date, if	(Instr. 8		1		Beneficia Reported		nt of Securities ally Owned Following Transaction(s)		Ownership Form:	Beneficial	
			(IVI	ontii/Day/ i ear)	Code	V	Amount (A) or (D)		Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Ste	tock	07/14/2020			A		16,611	A	\$ 0	100,423	(1)		D		
Reminder: Rep	port on a separate line	for each class of	ecurities	beneficially ov	wned dire	Perso	ons who	respon			tion of inf			474 (9-02)	
Reminder: Rep	port on a separate line		II - Deri	ivative Securiti	ies Acqui	Perso conta the fo	ons who nined in orm disp	respon this form plays a co	n are urren ficiall	not requ itly valid	ired to res	formation spond unle trol numbe	ss	474 (9-02)	
1. Title of 2. Derivative Security (Instr. 3) Pric Derivative	3. Transacti	on 3A. Dee Execution any	II - Deri (e.g., ned n Date, if	tvative Securiti puts, calls, wa 4. f Transaction Code () (Instr. 8)	ies Acqui arrants, o	Persoconta the fo red, Dis ptions, o 6. Dat and E (Mon	ons who nined in orm disp	o respon this forr plays a c f, or Bene ble secur isable in Date	ficiallities) 7. Tit Amo Unde	not requested valid y Owned tle and count of earlying	OMB cont	spond unle	f 10. Ownersh Form of Derivativ Security: Direct (I or Indire	11. Nat of Indir Benefic Owners (Instr. 4	

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
ROSENWALD LINDSAY A MD 377 PLANTATION STREET WORCESTER, MA 01605	X					

Signatures

/s/ Manuel Litchman, Attorney-in-Fact	08/19/2020
**Signature of Reporting Person	Date

Explanation of Responses:

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).
- (1) Includes 100,423 restricted stock units which vest over time.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.