FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, I | D.C. | 20549 | |
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|---------------|------|-------|--|

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|
| | | | |

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

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* MOORE ALISON | | | | | 2. Issuer Name and Ticker or Trading Symbol Allogene Therapeutics, Inc. [ALLO] | | | | | (Ch | elationship o eck all applica Director Officer (| able) | 10 | o Issue % Owi ner (sp | ner | | |
|--|---------------|--------------------------------|-----------------|-----------------------------|---|------------|---------|--|----------------------|--|---|---|--|--|--------------|---------------------------------------|--|
| (Last) 210 EAS | (F T GRAND | , | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 03/23/2022 | | | | | | X Officer (give title below) Chief Technical Officer | | | | | | |
| (Street) SOUTH FRANCI | C | A | 94080 | 4. | . If Ame | endment, [| Date of | Original Fi | iled (| Month/Da | y/Year) | Line | X Form fil | oint/Group F ed by One I ed by More | Reporting P | erson | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | |
| | | Ta | ble I - Non-D | erivati | ve Se | ecuritie | s Acc | quired, [| Disp | osed o | f, or Be | neficiall | / Owned | | | | |
| Date | | Transaction te onth/Day/ | Execution Date, | | Code (Instr. | | | 5. Amoun Securities Beneficia Owned Fo Reported | s lly ollowing | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | Code | v | Amount | (A) o (D) | r Price | Transacti (Instr. 3 a | on(s) | | " | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| Security or Exercise (Month/Day/Year) if any | | Execution Date, | Code | Transaction Code (Instr. | | Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction | Owne Form Direct or Ind (I) (In: | (D) irect | Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | | Date Exercisable | | kpiration ate | Title | Amount or Number of Shares | | (Instr. 4) | (-5) | | |
| Stock Option (Right to Buy) | \$9.69 | 03/23/2022 | | A | | 737,179 | | (1) | 03 | 3/23/2032 | Common Stock | 737,179 | \$0.00 | 737,179 |) [|) | |

Explanation of Responses:

1. 25% of the shares subject to the stock option shall vest on March 13, 2023, and the remaining shares shall vest in 36 equal monthly installments thereafter.

Remarks:

/s/ Veer Bhavnagri, Attorney-in-03/25/2022 Fact for Alison Moore

** 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.