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* <u>PFIZER INC</u>	2. Date of Eve Requiring Stat (Month/Day/Y 10/10/2018	tement	3. Issuer Name and Ticker or Trading Symbol Allogene Therapeutics, Inc. [ALLO]					
(Last) (First) (Middle) 235 E 42ND ST			4. Relationship of Reporting Pers (Check all applicable) Director X	X 10% Owner	. (Mon	5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) NEW YORK NY 10017 (City) (State) (Zip)			Officer (give title below)			cable Line) Form filed by	Group Filing (Check One Reporting Person More than One rson	
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownershi Form: Direc or Indirect (I (Instr. 5)	t (D) (Instr.	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4)	2. Date Exerc Expiration Da (Month/Day/)	ate	3. Title and Amount of Securiti Underlying Derivative Security		4. Conversion or Exercise	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security			
Series A-1 Convertible Preferred Stock	(1)	(1)	Common Stock	21,976,484	0	D		

Explanation of Responses:

1. The shares of the Issuer's Series A-1 Convertible Preferred Stock (the "Preferred Stock") will automatically convert into shares of the Issuer's Common Stock on a 1-for-5.25 basis immediately prior to the closing of the Issuer's initial public offering of Common Stock and have no expiration date.

<u>/s/Susan Grant, Assistant</u> <u>Secretary on behalf of Pfizer</u>

Inc.

10/10/2018

** 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.