Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL											
OMB Number: 3235-02											
Estimated average burden											
hours per response	. 0.5										

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* Amado Rafael					2. Issuer Name and Ticker or Trading Symbol Allogene Therapeutics, Inc. [ALLO]								Check	all app	o of Reportin olicable) otor er (give title	ng Per	rson(s) to I 10% O Other (wner	
(Last) (First) (Middle) 210 EAST GRAND AVE					3. Date of Earliest Transaction (Month/Day/Year) 05/19/2022								X	below)		below)			
1	OUTH SAN CA 94080			4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					on		
(City)	(Sta	ate) (Ž	Zip)																
		Table	I - N	lon-Deriva	tive S	Secui	rities	Ac	quire	d, Di	sposed o	f, or E	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye					Year) i	Execution Date,		·	3. Transaction Code (Instr. 8)					and 5) Secur Benef		icially d Following	Forn (D) o	wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								v	Amount	(A) or (D)	Price		Transa	saction(s) r. 3 and 4)			(moai. 4)		
Common Stock 05/19/202				22				S ⁽¹⁾		11,500	D	\$7.39	93(2)	546,257(3)			D		
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 Price of Derivative Security 3. Transaction Date (Month/Day/Year) 3. Deemed Execution Date, if any (Month/Day/Year)			ssaction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst: 3 and 4) Amour or Numbe of Title Shares		t		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

- 1. Represents the number of shares sold by the reporting person to cover tax withholding obligations in connection with the vesting of restricted stock units. This sale is mandated by the Issuer's election under its equity incentive plan to require the satisfaction of tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary trade by the reporting person.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$7.32 to 7.445, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth above.
- 3. Includes 280 shares of the Issuer's common stock acquired by the reporting person on September 15, 2021 pursuant to an employee stock purchase program.

Remarks:

Veer Bhavnagri as attorney-in-05/19/2022 fact for Rafael Amado

** 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.