FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

| 1. Name and Address of Reporting Person* Amin Dipti  |  |            |       |                                    | 2. Issuer Name and Ticker or Trading Symbol Lineage Cell Therapeutics, Inc. [ LCTX ] |        |  |                     |   |   |                  |   |   | ck all applic<br>Directo   | cable)<br>or                      | g Pers   | son(s) to Iss                         |  |
|--|--|------------|-------|------------------------------------|--|--------|--|---------------------|---|---|------------------|---|---|--|-----------------------------------|--|---------------------------------------|--|
| (Last) (First) (Middle) C/O LINEAGE CELL THERAPEUTICS  |  |            |       |                                    | 3. Date of Earliest Transaction (Month/Day/Year) 07/01/2022                          |        |  |                     |   |   |                  |   | Officer<br>below)   | (give title  |                                   | Other (s<br>below)   | specify                               |  |
| 2173 SALK AVENUE, SUITE 200  |  |            |       |                                    | 4. If Amendment, Date of Original Filed (Month/Day/Year)                             |        |  |                     |   |   |                  |   | 6. Individual or Joint/Group Filing (Check Applicable Line) |  |                                   |  |                                       |  |
| (Street) CARLSE  | Street) CARLSBAD CA 92008  |            |       |                                    |  |        |  |                     |   |   |                  | X   |   | led by Mor   |                                   | orting Perso<br>n One Repo   |                                       |  |
| (City)   | (S   | tate)      | (Zip) |                                    |  |        |  |                     |   |   |                  |   |   |  |                                   |  |                                       |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |  |            |       |                                    |  |        |  |                     |   |   |                  |   |   |  |                                   |  |                                       |  |
| Date   |  |            |       | ?. Transacti<br>Date<br>Month/Day/ | Execution Date,  |        | Transaction Disposed Code (Instr. 5)                           |                     | ities Acquired (A) o<br>d Of (D) (Instr. 3, 4 a |   | or<br>and        | 5. Amour<br>Securitie<br>Beneficia<br>Owned F<br>Reported | es Formally (D) (I) (I                                      |  | : Direct<br>r Indirect<br>str. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)        |                                       |  |
|  |  |            |       |                                    |  |        | Code   | V                   | Amount  | (A) or<br>(D)   |                  | се  | Transaction(s)<br>(Instr. 3 and 4)                          |  |                                   |  | ()                                    |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |            |       |                                    |  |        |  |                     |   |   |                  |   |   |  |                                   |  |                                       |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any |            |       | Code                               | ransaction of Code (Instr. Derivative  |        | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                     |   | 7. Title and Amount<br>of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                  | [   | 3. Price of<br>Derivative<br>Security<br>(Instr. 5)         | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) |                                   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |  |            |       | Code                               | e V  | (A)    | (D)  | Date<br>Exercisable |   | xpiration<br>ate  | Title            | Amou<br>or<br>Numb<br>of<br>Share                         | per   |  |                                   |  |                                       |  |
| Stock<br>Option<br>(right to<br>buy)   | \$1.57   | 07/01/2022 |       | А                                  |  | 50,000 |  | (1)                 | 0   | 7/01/2032   | Common<br>Shares | 50,0  | 00  | \$0  | 50,000                            | )  | D                                     |  |

## **Explanation of Responses:**

1. Will vest and become exercisable on July 1, 2023, subject to the reporting person's continuous service with the issuer.

/s/ Grant Harbert, as Attorneyin-Fact

07/06/2022

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).