FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMB APPROVAL										
OMB Number:	3235-0287									
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0.5

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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative
defense conditions of Rule 10b5-

1(0). 36	e instructio	1110.																			
1. Name and Address of Reporting Person* <u>Samuel George A. III</u>					2. Issuer Name and Ticker or Trading Symbol Lineage Cell Therapeutics, Inc. [LCTX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
								1		, <u></u>		,		Direc	ctor		10% Ov	vner			
														_		er (give title		Other (s	specify		
(Last)	(First)	(Middle)			Date of Earliest Transaction (Month/Day/Year)									- Delov	, , ,					
2173 SAI	LK AVE	NUE			11/2	11/26/2024									General Counsel						
SUITE 20	00																				
50111 20	00				4 If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)					"/	uncn	unioni,	Date 0	Oligilio		a (Month) ba	iy/ ica	,	Lin		1 001110 0100	p i iiiig	(Oncok A	pplicable		
CARLSB	AD (CA	92008												√ Form	filed by On	e Repo	orting Perso	on		
CARLSD	DAD (JA	92008												Form filed by More than One Reporting						
				-											Perso	on					
(City)	(State)	(Zip)																		
		Tab	le I - No	n-Deriva	ative	Secu	ırities	Acq	uired,	Dis	posed of	, or	Ben	eficia	ally Own	ed					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)			Executi		cution ny	Date,	Transaction Disposed (Code (Instr. 5)			ies Acquired (A Of (D) (Instr. 3,			Benefi Owned	ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A (D	() or ()	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Shares 11/26/2					2024				P		15,000 A		A	\$ <mark>0</mark> .	5 22,184			D			
		7	able II -								osed of, onvertib					d	,	·			
	2. Conversic or Exercis Price of Derivative Security		Execut r) if any	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				6. Date Exercis Expiration Date (Month/Day/Yea		7. Title and Amount of Securities Underlying Derivative Security (In: 3 and 4)		,	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ow For Dire or I (I) (0. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Natur of Indirec Beneficia Ownersh (Instr. 4)		
			1				1					İ	Am	ount							
			1										or	nber							
					Code	\v	(A)	(D)	Date Exercis	able	Expiration Date	Title	of								

Explanation of Responses:

/s/ George A. Samuel III

11/26/2024

** 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.

 $^{^{\}star}$ 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).