FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL						
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## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 GLAXOSMITHKLINE PLC	3. Issuer Name and Ticker or Trading Symbol <u>Lyell Immunopharma, Inc.</u> [ LYEL ]									
(Last) (First) (Middle) 980 GREAT WEST ROAD  (Street)		4. Relationship of Reporting P Issuer (Check all applicable) Director X Officer (give title below)		( )		If Amendment, Date of Original Filed (Month/Day/Year)      Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting				
MIDDLESEX X0 TW8 90  (City) (State) (Zip)	GS						Person	y More than One erson		
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)		Beneficially Owned (Instr. 4)				I. 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 Day/Y	ate	3. Title and Amount of Securi Underlying Derivative Securit 4)			4. Conversion or Exercise Price of	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr.		
	Date Exercisable	Expiration Date	Title		unt or ber of es	Derivative Security	or Indirect (I) (Instr. 5)	5)		
Series AA Preferred Stock	(1)	(1)	Common Stock	30,2	53,189	(1)	I	See footnote <sup>(2)</sup>		

## **Explanation of Responses:**

- 1. The Series AA Preferred Stock is convertible into common stock on a 1-for-1 basis into the number of shares of common stock shown in Column 3 without payment of further consideration at the holder's election and automatically upon closing of the initial public offering of the Issuer's common stock. The shares have no expiration date.
- 2. The shares reported herein are held of record by Glaxo Group Limited, an indirect, wholly-owned subsidiary of GlaxoSmithKline plc (the "Reporting Person").

/s/ V. Whyte, Authorized

Signatory,

06/17/2021

GlaxoSmithKline plc

\*\* Signature of Reporting

Date

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

- $^{\star}$  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.