FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANG	ES IN BE	NEFICIAL	<b>OWNERS</b>	HIP

1	OMB APPI	ROVAL
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	Check this box if no longer subject to
٦	Section 16. Form 4 or Form 5 obligations may continue. See
J	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*  Wolchko J Scott				2. Issuer Name and Ticker or Trading Symbol FATE THERAPEUTICS INC FATE							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
WOICH	<u> </u>	:											X	Director	•		10% Ow	ner
													X		give title		Other (s	pecify
(Last)	•	First)	(Middle)				Transa	action (Mont	:h/Day	//Year)				below) below)				
C/O FAT	E THERA	PEUTICS, INC.;		0	01/08/2020								President and CEO					
3535 GE	NERAL A	TOMICS COUR	T #200															
				—— <b> </b> 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)													Line)	Farm fil	ad bu Ona	Danas	tina Davasa	
SAN DI	EGO C	A	92121										X		,	•	rting Person	
														Person	ea by More	e tnan	One Report	ing
(City)	(9	State)	(Zip)															
		To	bla I. Non F	) Orivoti	· · · · · · ·	ritio	- Λο <i>ι</i>	nuirad D	iono	2004.0	f or Bo	nofici	ally	Owned				
		Id	ble I - Non-D	erivati	ve Se	curities	SACC	quireu, D	<u> </u>					Owned				
Date			Transaction	saction 2A. Deemed Execution Date,		Code (Instr.		red (A) o	or 5. Amour 4 and 5) Securitie Beneficia Owned F		s Form			7. Nature of Indirect Beneficial Ownership				
			(Month/Day/Year)		if any (Month/Day/Year			( . , ( , .										
						(Month/Day/Teal		)   0)		<u> </u>			Report		d			(Instr. 4)
								Code	/   <i>f</i>	Amount	(A) ( (D)	or Pri	ce	Transacti (Instr. 3 a				
Common	Stock <sup>(1)</sup>			01/08/20	8/2020		A	$\neg$	66,00	00 A	. \$	0.00	419,969			D		
							_											
			Table II - De (e.					uired, Dis , options						wned				
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numbe	er of	6. Date Exer	cisable	e and	7. Title ar	d Amou	nt	8. Price of	9. Numbe	r of	10.	11. Nature
Derivative Conversion Date Execution D		Execution Date, if any	ate, Transaction Code (Instr.		saction Derivative Securities Acquired (A)		Expiration Date of S (Month/Day/Year) Und Der			of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security		derivative Securities		Ownership Form:	of Indirect Beneficial	
														(Instr. 5)	Beneficially		Direct (D)	Ownership
				or Disposèd of (D) (Instr.										Owned Following		or Indirect (I) (Instr. 4)	(Instr. 4)	
				3, 4 and 5	3, 4 and 5)								Reported Transacti					
									1			Amou	nt		(Instr. 4)			
				Code	l <sub>v</sub>	(A)		Date Exercisable		iration	Title	Numb of Sha						
Stock		] 		-	Ė	6.9	(-,			-		5. 5.10	- 70					
Option (right to	\$21.99	01/08/2020		A		219,000		(2)	01/0	08/2030	Common	219,0	000	(3)	219,00	00	D	

## Explanation of Responses:

- 1. Award of restricted stock units that vests with respect to 1/4 of the underlying shares on each of January 8, 2021, January 8, 2022, January 8, 2023, and January 8, 2024. This grant is subject to an accelerated vesting upon a change of control of the Issuer and in the event of termination of employment under certain circumstances following a change of control of the Issuer.
- 2. The shares subject to this option shall vest and become exercisable in 48 equal monthly installments beginning on February 1, 2020 such that this option is fully exercisable on January 1, 2024.
- 3. Not applicable.

## Remarks:

/s/ Cindy R. Tahl, as Attorney-

01/10/2020

in-Fact

\*\* 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.