Check

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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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(h)	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 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*     Chu Yu-Waye						2. Issuer Name and Ticker or Trading Symbol FATE THERAPEUTICS INC [ FATE ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify balance) below)					
(Last) (First) (Middle) C/O FATE THERAPEUTICS, INC. 12278 SCRIPPS SUMMIT DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 01/11/2022									below			below)	·	
(Street) SAN DII	EGO CA	A 9	2131 Zip)		4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								5. Indiv Line) X	′					
		Table	I - No	on-Deriva	tive S	Secui	rities	Acc	quired	l, Dis	sposed of	, or B	enefic	cially	Own	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/			.	Execution		tion Date,				4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			5. Amo Securit Benefic Owned	ties cially I Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price		Transa	saction(s) r. 3 and 4)			(111511.4)	
Common Stock 01/11/20						)22					3,547	D	\$48.	<b>44</b> <sup>(2)</sup>	122,211			D		
Common Stock 01/11/20					022				S <sup>(1)</sup>		418	D	\$49	9.1 <sup>(3)</sup> 12		21,793		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)	ative Conversion Date Execution Date, if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Der Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares							

## **Explanation of Responses:**

- 1. Required number of shares sold by the reporting person to cover tax withholding obligations in connection with the vesting of 6,250 shares of Common Stock underlying RSUs granted to the reporting person on January 8, 2020 and 4,503 shares of Common Stock underlying RSUs granted to the reporting person on January 20, 2021. These sales were made pursuant to an irrevocable election by the reporting person to satisfy tax withholding obligations through "sell to cover" transactions and do not represent discretionary trades by the reporting person.
- 2. Represents the weighted average sale price of the shares sold ranging from \$47.68 to \$48.67 per share. The Reporting Person will provide, upon request by the Commission staff, the Issuer, or a security holder of the Issuer, full information regarding the number of shares sold at each price within the ranges set forth in footnotes 2 through 3.
- 3. Represents the weighted average sale price of the shares sold ranging from \$48.71 to \$49.25 per share.

## Remarks:

/s/ Cindy Tahl, as Attorney-in-

Fact

\*\* Signature of Reporting Person Date

01/13/2022

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.