SEC For	m 4 FORM	4	UNITE	ED ST		s s	ECL	JRITIE			EXCHA	NGE C	OMM	ISSION				
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Check Section obligat Instruc					ANGE			RSHIP OMB Num Estimated hours per			verage burde	3235-0287 n 0.5						
					0	r Sect	ion 30	(h) of the	Investm	ent C	ompany Act	of 1940						
1. Name and Address of Reporting Person <sup>*</sup> Wolchko J Scott						2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>FATE THERAPEUTICS INC</u> [FATE ]								5. Relationship of Reporting Pe (Check all applicable) X Director			son(s) to Iss 10% Ov	
(Last) (First) (Middle) C/O FATE THERAPEUTICS, INC.; 3535 GENERAL ATOMICS COURT #200						Date 1/22/2		iest Trans	saction (Month/Day/Year)						Officer (give title below) President		Other (s below) CEO	specify
(Street) SAN DIEGO CA 92121					_ 4.	lf Am	endme	nt, Date o	of Original Filed (Month/Day/Year)			ıy/Year)		6. Individual or Joint/Group Line) X Form filed by One Form filed by Mor Person			orting Perso	n
(City)	(S	tate)	(Zip)											Persor	1			
		Tat	ole I - N	on-Deri	vativ	e Se	curi	ties Ac	quirea	d, Di	sposed o	f, or Be	neficia	Ily Owned	l			
1. Title of Security (Instr. 3)				2. Transa Date (Month/E		ur) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquir Disposed Of (D) (Ins			5) Securiti Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)			(1150.4)
Common	04/22	1			<b>M</b> <sup>(1)</sup>		30,000	A	\$2.7	3 423	3,793		D					
Common	04/22/2021					<b>S</b> <sup>(1)</sup>		30,000	D	\$85.54	404 393	3,793		D				
Common stock				04/23/2021					<b>M</b> <sup>(1)</sup>		10,000	A	\$2.7	3 403	3,793		D	
Common stock				04/23/2021					<b>M</b> <sup>(1)</sup>		14,846	A	\$6.6	2 418	3,639		D	
Common stock				04/23/2021					<b>M</b> <sup>(1)</sup>		5,154	A	\$4.83		3,793		D	
Common	stock			04/23					<b>S</b> <sup>(1)</sup>		30,000	D	\$85.24		3,793		D	
		-	Table II								oosed of, convertil			y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/E	ned n Date,	4. Transa Code 8)	action	5. Number on of		6. Date Exerci Expiration Da (Month/Day/Y		isable and ite	7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		Derivative Security	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy J	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$2.73	04/22/2021			<b>M</b> <sup>(1)</sup>			30,000	(2)		01/03/2027	Common Stock	30,000	) (3)	140,00	00	D	
Stock Option (right to buy)	\$2.73	04/23/2021			M <sup>(1)</sup>			10,000	(2)		01/03/2027	Common Stock	10,000	) (3)	130,00	00	D	
Stock Option (right to buy)	\$6.62	04/23/2021			M <sup>(1)</sup>			14,846	(2)		01/08/2024	Common Stock	14,840	5 (3)	0		D	
Stock Option (right to buy)	\$4.835	04/23/2021			<b>M</b> <sup>(1)</sup>			5,154	(2)		01/04/2025	Common Stock	5,154	(3)	64,84	6	D	
1. This transa	n of Respons action was effe n is fully vested	cted pursuant to a Ru	le 10b5-1 t	rading plar	adopte	ed by t	he Rep	orting Pers	son on Ju	ne 10,	2020.							

3. Not applicable.

Remarks:

/s/ Cindy R. Tahl, as Attorney-04/26/2021 in-Fact

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.