FORM 4

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

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

Washington, D.C. 20549
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Check this box if no longer subject	STATEMENT OF CHANGES IN BENEFICIAL	<b>OWNERSHIP</b>
to Section 16. Form 4 or Form 5		• • • • • • • • • • • • • • • • • • • •
abligations may continue Coo		

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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* HERSHBERG ROBERT						2. Issuer Name and Ticker or Trading Symbol FATE THERAPEUTICS INC [FATE]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
HERSHBERG ROBERT													X	Direc	tor		10% O	wner		
(Last) C/O FAT	,	irst) (I PEUTICS, INC.	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/03/2022									Office below	er (give title v)		Other ( below)	specify	
12278 SCRIPPS SUMMIT DRIVE					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)														Line)  X Form filed by One Reporting Person						
SAN DII	EGO C	A 9	2131												Form filed by More than One Reporting Person					
(City)	(S	tate) (2	Zip)																	
		Table	I - No	on-Deriva	tive S	Secui	rities	Acc	quirec	d, Dis	sposed of	, or E	enefic	ially	<b>Own</b>	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day)				Execution Date,		,	3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4					and 5) Securi Benef		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Transa	nsaction(s) tr. 3 and 4)			(Instr. 4)	
Common Stock 06/03			06/03/20	022				<b>S</b> <sup>(1)</sup>		672	D	\$22.7	75 <sup>(2)</sup> 2,		2,009		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)	erivative Conversion Date Execution   ecurity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expira	e Exerc ation D h/Day/ <sup>^</sup>		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Der Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y [1	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Number of Shares							

## **Explanation of Responses:**

- 1. Required number of shares sold by the reporting person to cover tax obligations in connection with the vesting of 2,681 shares of Common Stock underlying RSUs granted to the reporting person on June 2, 2021. This sale was made pursuant to an irrevocable election by the reporting person to satisfy tax obligations through a "sell to cover" transaction and does not represent a discretionary trade by the reporting person.
- 2. Represents the weighted average sale price of the shares sold from \$22.53 to \$22.86 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 separate price within the ranges set forth in footnote 2.

## Remarks:

/s/ Cindy Tahl, as Attorney-in-

06/06/2022

**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.