## SEC Form 4

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# FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subje	ect to
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL									
OMB Number: 3235-02									
Estimated average burden									
hours per response.	05								

1. Name and Address of Reporting Person*			2. Issuer Name <b>and</b> Ticker or Trading Symbol FATE THERAPEUTICS INC [FATE ]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Wolchko J Scott</u>			<u></u>	X	Director	10% Owner				
(Last) (First) (Middle)		(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	<b>-</b> x	Officer (give title below)	Other (specify below)				
C/O FATE THERAPEUTICS, INC.;			03/21/2019		President an	d CEO				
3535 GENERAL ATOMICS COURT #200										
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	/idual or Joint/Group Filii	ng (Check Applicable				
SAN DIEGO	CA	92121		X	Form filed by One Re	porting Person				
	_		—		Form filed by More the Person	an One Reporting				
(City)	(State)	(Zip)								

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	03/21/2019		<b>M</b> <sup>(1)</sup>		20,000	A	<b>\$1.63</b>	394,881	D	
Common Stock	03/21/2019		<b>S</b> <sup>(1)</sup>		20,000	D	\$17.608 <sup>(2)</sup>	374,881	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to buy)	\$1.63	03/21/2019		<b>M</b> <sup>(1)</sup>			20,000	(3)	02/08/2022	Common Stock	20,000	(4)	7,935	D	

#### Explanation of Responses:

1. This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 20, 2018.

2. Represents the weighted average sale price of the shares sold ranging from \$17.27 to \$17.88 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.

3. The shares subject to this option became fully vested and exercisable on May 30, 2015.

#### 4. Not applicable.

**Remarks:** 

<u>/s/ Cindy R. Tahl, as Attorneyin-Fact</u>

03/22/2019

\*\* 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.