| SEC Foi | rm 4 | | | | | | | | | | | | | | | | | | | |
|--|---------------------------------------|--|------|--|--------------------------------|---|--|-----------------------------|-----------|--|-------|---|-----------------------|--|---|---|---|------------------------------|--|--|
| FORM 4 | | | | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | SSION | N OMB APPROVAL | | | | | | | |
| Section 16. Form 4 or Form 5 obligations may continue. See | | | | | | | IT OF CHANGES IN BENEFICIAL OWNI pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | Estim | OMB Number: Estimated average burde hours per response: | | 3235-0287 en 0.5 | | |
| 1. Name and Address of Reporting Person* <u>MENDLEIN JOHN</u> | | | | | | FAT | 2. Issuer Name and Ticker or Trading Symbol <u>FATE THERAPEUTICS INC</u> [FATE] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
| (Last) | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/06/2023 | | | | | | | Officer (give title Other (specify below) below) | | | | | | |
| C/O FATE THERAPEUTICS, INC. 12278 SCRIPPS SUMMIT DRIVE | | | | | | 4. If An | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | |
| (Street) SAN DIEGO CA 92131 | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) | | | | | | | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | | |
| | | | Tabl | e I - Nor | n-Deriv | ative S | ecurities Ac | quired | , Dis | posed | of, o | r Bene | ficial | y Owned | k | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/E | | | | | action Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Yea | Code | Transaction Code (Instr. | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3 5) | | | Securitie Benefici | neficially vned Following | | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | v | Amour | nt | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | | (3 (1 -) | | |
| | | | Т | | | | curities Acq IIs, warrants | | | | | | | Owned | | | | | | |
| 1. Title of Derivative Security | vative Conversion Date Execution Date | | | Date, | 4. Transactio Code (Inst | | 6. Date E Expiration (Month/I | | Amount of | | | 8. Price of Derivative Security Securiti | | | 10. Ownership Form: | 11. Nature of Indirec Beneficia | | | | |

Explanation of Responses:

\$5.52

1. This transaction represents a grant of options pursuant to the terms of the Issuer's Amended and Restated Non-Employee Director Compensation Policy which provides for annual equity grants to the Issuer's non-employee directors on the date of the Issuer's Annual Meeting of Stockholders.

(D)

2. The shares subject to this option shall vest and become exercisable on the earlier of (i) June 6, 2024 or (ii) the date of the Issuer's 2024 Annual Meeting of Stockholders, subject to the Reporting Person's continued service on the Issuer's Board of Directors.

Date Exercisable

(2)

Expiration Date

06/06/2033

Remarks:

Security (Instr. 3)

Stock Option (Right to

Buy)

Price of Derivative

Security

06/06/2023

/s/ Cindy Tahl, as Attorney-in-06/07/2023 Fact

** Signature of Reporting Person Date

Title

Commor Stock

Securities Underlying Derivative Security

Amount or Number

of Shares

40,000

(Instr. 3 and 4)

Owned

Following Reported

Transaction(s) (Instr. 4)

40,000

Securities Beneficially

Security (Instr. 5)

\$0.00

Beneficial Ownership

(Instr. 4)

Form: Direct (D)

or Indirect

(I) (Instr. 4)

D

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

if any (Month/Day/Year)

Code (Instr. 8)

Code v (A)

A⁽¹⁾

Securities Acquired

(A) or Disposed

of (D) (Instr. 3, 4 and 5)

40,000

* 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.