FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* Shoemaker Daniel D						2. Issuer Name and Ticker or Trading Symbol FATE THERAPEUTICS INC [FATE]									ionship of Reporting Pers all applicable) Director Officer (give title		son(s) to Issu 10% Ow Other (s	ner	
(Last) (First) (Middle) C/O FATE THERAPEUTICS, INC.; 3535 GENERAL ATOMICS COURT #200					3. Date of Earliest Transaction (Month/Day/Year) 06/27/2019								Λ	Chief Scientific Officer					
(Street) SAN DIEGO CA 92121					_ 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Indiv ne) X	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				tion	2A. D Exec if any	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			5. Amou Securiti Benefic Owned		nt of es ally -ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3	tion(s)	on(s)		Instr. 4)
Common Stock 06/27/201					2019	.9			M ⁽¹⁾		12,500	Α	\$2.9	.9 14		3,091		D	
Common Stock 06/27/201					2019	.9			S ⁽¹⁾		12,500	D	\$20.208).2088 ⁽²⁾ 1		5,591		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)	if any	emed ion Date, /Day/Year)		ansaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	de V		(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares	er					
Stock Option (right to	\$2.9	06/27/2019			M ⁽¹⁾			12,500	(3	3)	01/07/2026	Common	¹ 12,500		(4)	123,80	0	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 and modified on December 10, 2018.
- 2. Represents the weighted average sale price of the shares sold ranging from \$19.65 to \$20.47 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 shall vest and become exercisable in 48 equal monthly installments beginning on February 8, 2016 such that this option is fully exercisable on January 8, 2020.
- 4. Not applicable.

Remarks:

/s/ Cindy R. Tahl, as Attorney-06/28/2019 in-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.