## Edgar Filing: FATE THERAPEUTICS INC - Form 3

## FATE THERAPEUTICS INC Form 3 September 30, 2013 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

Statement

(Month/Day/Year) 09/30/2013

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

on(a) to I

4. Relationship of Reporting

FATE THERAPEUTICS INC [FATE]

(Print or Type Responses)

Weyer Christian

Person \*

(Last)

1. Name and Address of Reporting

(First)

(Middle)

|  |   |   | Person(s) to  | Filed(Mo   | Filed(Month/Day/Year)  |                  |  |
|--|---|---|---|--|--|------------------|--|
| C/O FATE THERAPEUTICS,<br>INC, 3535 GENERAL<br>ATOMICS COURT, SUITE 200<br>(Street)<br>SAN DIEGO, CA 92121 |   |   | (Che<br>X Direc<br>X Offic<br>(give title be                | w)   | <ul> <li>6. Individual or Joint/Group</li> <li>Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting</li> <li>Person</li> <li> Form filed by More than One</li> <li>Reporting Person</li> </ul> |                  |  |
|  |   |   |   | _X_ Form<br>Person<br>Form<br>Reporting                                    |  |                  |  |
| (City) (S  | State)  | (Zip)   | Table I - Non-Derivative Securities Beneficially Owned      |  |  |                  |  |
| 1.Title of Security<br>(Instr. 4)  |   |   | 2. Amount of Securities<br>Beneficially Owned<br>(Instr. 4) | 3.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I)<br>(Instr. 5) | 4. Nature of Ind<br>Ownership<br>(Instr. 5)  | irect Beneficial |  |
| Reminder: Report of<br>owned directly or in  | ndirectly.<br>Persons<br>informat<br>requirec | e line for each class of sect<br>s who respond to the c<br>tion contained in this f<br>I to respond unless th<br>y valid OMB control ne | ollection of<br>form are not<br>e form displays a           | SEC 1473 (7-02   |  |                  |  |

### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security<br>(Instr. 4) | ity 2. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 3. Title and Amount of<br>Securities Underlying<br>Derivative Security<br>(Instr. 4) |                        | 4.<br>Conversion<br>or Exercise<br>Price of | 5.<br>Ownership<br>Form of<br>Derivative | 6. Nature of Indirect<br>Beneficial Ownership<br>(Instr. 5) |
|---|--|--------------------|--|------------------------|---|--|---|
|   | Date<br>Exercisable  | Expiration<br>Date | Title  | Amount or<br>Number of | Derivative<br>Security                      | Security:<br>Direct (D)                  |   |

OMB 3235-0104 Number: January 31, 2005

Estimated average burden hours per response... 0.5

5. If Amendment, Date Original

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|                             |             |            |                 | Shares  |         | or Indirect<br>(I)<br>(Instr. 5) |   |
|-----------------------------|-------------|------------|-----------------|---------|---------|----------------------------------|---|
| Stock Option (right to buy) | (1)         | 10/09/2022 | Common<br>Stock | 218,097 | \$ 1.37 | D                                | Â |
| Stock Option (right to buy) | (2)         | 10/09/2022 | Common<br>Stock | 293,040 | \$ 1.37 | D                                | Â |
| Stock Option (right to buy) | ( <u>3)</u> | 10/09/2022 | Common<br>Stock | 143,154 | \$ 1.37 | D                                | Â |

# **Reporting Owners**

| <b>Reporting Owner Name / Address</b>   |          | Relationships |             |       |  |  |
|---|----------|---------------|-------------|-------|--|--|
|   | Director | 10% Owner     | Officer     | Other |  |  |
| Weyer Christian<br>C/O FATE THERAPEUTICS, INC<br>3535 GENERAL ATOMICS COURT, SUITE 200<br>SAN DIEGO, CA 92121 | ÂX       | Â             | See remarks | Â     |  |  |
| Signatures  |          |               |             |       |  |  |

/s/ Christian 09/30/2013 Weyer \*\*Signature of Date

Reporting Person **Explanation of Responses:** 

- If the form is filed by more than one reporting person, see Instruction 5(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).

The shares subject to this option shall vest and become exercisable upon achievement of certain performance based milestones. A portion (1) of this option is subject to accelerated vesting in the event of termination of employment under certain circumstances following a change of control or other transaction-based milestone of the Issuer.

The shares subject to this option shall vest and become exercisable at the rate of 1/4th of the shares on October 8, 2013 and 1/48th of the shares each month thereafter such that this option is fully exercisable on October 8, 2016. This option is subject to accelerated vesting

(2) upon a change of control of the Issuer and in the event of termination of employment under certain circumstances following a change of control of the Issuer.

The shares subject to this option shall vest at the rate of 1/4th of the shares on October 8, 2013 and 1/48th of the shares each month thereafter such that all the shares subject to this option are fully vested on October 8, 2016. The shares subject to this option are early (3)exercisable, subject to a right of repurchase held by the Issuer. This option is subject to accelerated vesting upon a change of control of

### the Issuer and in the event of termination of employment under certain circumstances following a change of control of the Issuer.

## Â

## **Remarks:**

## President and Chief Executive Officer

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.