FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number: 3235-0104							
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

1. Name and Add Wolff Henry	F	2. Date of Event Requiring Staten Month/Day/Year 06/07/2006	nent	3. Issuer Name and Ticker or Trading Symbol SANGAMO BIOSCIENCES INC [ SGMO ]										
(Last) (First) (Middle) C/O SANGAMO BIOSCIENCES INC, STE A-100					Relationship of Reporting Pers (Check all applicable)     X Director		10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)					
POINT RICHI CANAL BL.	CNTR, 501				Officer (give title below)	Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
(Street) RICHMOND	CA	94804							Form filed b Reporting P	y More than One erson				
(City)	(State)	(Zip)												
	Table I - Non-Derivative Securities Beneficially Owned													
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)					
Common Stock						1,000	D							
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)														
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable ar Expiration Date (Month/Day/Year)		nd 3. Title and Amount of Secur Underlying Derivative Secur			4. Conversion or Exercise Price of		6. Nature of Indirect Beneficial Ownership (Instr. 5)				
		Date Exercisable	Expiration Date		iitle	Amount or Number of Shares	Derivative Security							

Explanation of Responses:

/s/ H. Ward Wolff

06/07/2006

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

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.