FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.O. 20045	

OMB APPROVAL 3235-0287

0.5

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	Check this box if no longer subject to
١	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

						. , ,												
1. Name and Address of Reporting Person* Wolff Henry Ward					2. Issuer Name and Ticker or Trading Symbol SANGAMO BIOSCIENCES INC [SGMO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(14)	/5	:4)	(A 4: -1 -11 -)										below)	give title		Other (sp below)	pecify	
(Last) (First) (Middle)				I	3. Date of Earliest Transaction (Month/Day/Year) 12/07/2009								Exec VP & CFO					
C/O SANGAMO BIOSCIENCES INC., STE A-100 POINT RICHMOND TECH CNTR, 501 CANAL BLVD			, 1.															
				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)											1 '	X Form filed by One Reporting Person						
RICHMOND CA 94804		94804										Form filed by More than One Reporting						
-													Person					
(City)	(S	tate)	(Zip)															
		Ta	ble I - Non-De	erivativ	ve Se	ecurities	s Ac	quired, D	isposed	of, c	or Ber	neficially	Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				е		2A. Deemed Execution Date, if any (Month/Day/Year		3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr.			ed (A) or tr. 3, 4 and 5	5. Amoun Securities Beneficia Owned Fo	s For ally (D) following (I) (m: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	Amour	nt	(A) or (D)	Price	Transacti (Instr. 3 a				nstr. 4)	
	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. Transactior Date (Month/Day/Youngle Security 3. Transaction Date (Month/Day/Youngle Security 5. Transaction Date (Mo		Execution Date, if any		4. Transaction Code (Instr. 8)		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)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		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	Titl	le	Amount or Number of Shares		(Instr. 4)	on(s)			
Employee Stock Option (Right to Buy)	\$5.35	12/07/2009		A		200,000		(1)	12/06/201		mmon itock	200,000	\$0	200,00	00	D		

Explanation of Responses:

1. The stock option vests and becomes exercisable for twenty-five percent of the shares upon the optionee's completion of one year of service measured from the grant date and vest and become exercisable for the balance of the shares in thirty-six successive equal monthly installments upon his or her completion of each additional month of service thereafter.

/s/ H. Ward Wolff

12/08/2009

** 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.