FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

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

1. Name and Address of Reporting Person* Yi Kathy (Last) (First) (Middle) C/O SANGAMO THERAPEUTICS, INC. POINT RICHMOND TECH CTR, 501 CANAL					<u>S</u> A	Issuer Name and Ticker or Trading Symbol SANGAMO THERAPEUTICS, INC [SGMO] 3. Date of Earliest Transaction (Month/Day/Year) 12/17/2018									c all appli Directo Officer below)	cable) or (give title	g Person(s) to Iss 10% Ow Other (s below)		vner specify
															SVP & Chief Financial Officer				
BLVD. (Street) RICHMO	OND C.	A	94804		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Indiv ne) X					n
(City)	(S	tate)	(Zip)																
		Tab	le I - No	n-Deri\	ative	Sec	curiti	ies Ac	quired	Dis	posed o	of, or Be	neficia	ally	Owned	ł			
Di Tillo di Goddiniy (ilidan dy		Date	ansaction nth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Secur Benef Owne		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) oi (D)	Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock 12/17, Common Stock 12/17,			12/17	12/17/2018				М		5,000) A	\$4.5	55	12	,250		D		
			7/2018	2018			S ⁽¹⁾		5,000) D	\$11	1.44 7,2		250 ⁽²⁾		D			
		7	able II -									, or Ben ble secu			wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,		ransaction code (Instr.		n of E		5. Date Exercisabl Expiration Date Month/Day/Year)		and 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		Di Si	erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	s B Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		xpiration ate	Title	Amoun or Numbe of Shares						
Stock Option (Right to	\$4.55	12/17/2018			M			5,000	(3)	0	2/27/2027	Common Stock	5,000		\$0.00	150,00	00	D	

Explanation of Responses:

- 1. The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on August 14, 2017.
- 2. Represents 7,250 shares subject to restricted stock units granted on January 24, 2018 that will vest in three (3) equal annual installments on each anniversary of the grant date, such that they will be vested in full on the third (3rd) anniversary of the grant date, subject to the Reporting Person's continued service with the Issuer through such date.
- 3. One-quarter (1/4) of the option shares vested and became exercisable upon completion of one (1) year of service by the Reporting Person measured from February 27, 2017, and the remainder will vest and become exercisable in equal monthly installments for thirty-six (36) months thereafter, provided that the Reporting Person remains in service with the Issuer through each such monthly vesting date.

Remarks:

Buy)

/s/ Denise Winn, Attorney-in-Fact for Kathy Yi

** Signature of Reporting Person Date

12/18/2018

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.