FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APF	PROVAL					
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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* RINGO WILLIAM R			2. Date of Event Requiring Statement (Month/Day/Year) 04/16/2010 3. Issuer Name and Ticker or Trading Symbol SANGAMO BIOSCIENCES INC [SG						0]		
(Last) (First) (Middle) C/O SANGAMO BIOSCIENCES INC.					Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				5. If Amendment, Date of Original Filed (Month/Day/Year)		
POINT RICHMOND TECH CNTR,501 CANAL BLVD.					Officer (give below)	title	Other (specify below)		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) RICHMOND	CA	94804								y More than One	
(City)	(State)	(Zip)									
		T	able I - Non	-Derivati	ve Securities B	eneficially	Owned				
1. Title of Securi	ty (Instr. 4)	Т	able I - Non	2.	ve Securities B Amount of Securitieneficially Owned (I	es nstr. 4)	Owned 3. Ownersh Form: Direct (Instr. 5)	t (D) (Ins	lature of Indirect tr. 5)	Beneficial Ownership	
1. Title of Securi	ty (Instr. 4)		Table II - D	2. Be	Amount of Securition	es nstr. 4) neficially C	3. Ownersh Form: Direct or Indirect ((Instr. 5)	et (D) (Ins		Beneficial Ownership	
Title of Securi Title of Deriva	,	(e .g	Table II - D	erivative S, warrar	Amount of Securition of Securition of Securities Ben	es nstr. 4) neficially C nvertible	3. Ownersh Form: Direct or Indirect ((Instr. 5) Owned securities	et (D) (Ins	5. Ownership	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Explanation of Responses:

No securities are beneficially owned.

<u>/s/ William R. Ringo</u> <u>04/19/2010</u>

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).