FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to Section 16. Form 4 or Form 5 | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
|--|--|
| Section 10. Form 4 or Form 5 | |
| | |

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* Ramasastry Saira | | | | | | 2. Issuer Name and Ticker or Trading Symbol SANGAMO BIOSCIENCES INC [SGMO] | | | | | | | | | ck all applic Directo | tionship of Reporting all applicable) Director | | 10% Ow | ner | |
|--|---|--|---|---------|------------|---|-------|--------|----------------------------------|--------|--|---|------------------|---|---|---|----------------|--|---------------------------------------|--|
| (Last) (First) (Middle) C/O SANGAMO BIOSCIENCES INC., POINT RICHMOND TECH CNTR, 501 CANAL BLVD | | | | | 08 | 3. Date of Earliest Transaction (Month/Day/Year) 08/08/2014 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | Officer (give title below) | | Other (s below) | | |
| (Street) RICHMOND CA 94804 | | | | | _ | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | | |
| | | Tak | le I - Nor | ı-Deriv | vativ | e Se | curit | ies Ac | quired | , Dis | posed o | f, or B | enefi | cially | Owned | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date (Month/ | | | | | ear) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code | Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | 5. Amou Securitie Benefici Owned F | es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | (A) (D) | | rice | Transaci (Instr. 3 | tion(s) | | | (Instr. 4) | | |
| Common Stock 08/08 | | | | | 8/201 | /2014 | | | М | | 10,00 | 00 1 | A : | \$5.03 | 10,000 | | | D | | |
| Common Stock 08/08 | | | | 8/201 | 4 | | | | | 10,00 | 00 I |) | \$14 | 0 | | | D | | | |
| | | | Table II - | | | | | | | | osed of, converti | | | | Owned | | | | | |
| Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, | Code (Inst | | | | 6. Date I Expiration (Month/I | n Dat | | and 7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or | ount nber ires | | | | | | |
| Employee Stock Option (Right to | \$5.03 | 08/08/2014 | | | М | | | 10,000 | (2) | | 06/20/2022 | Commo Stock | ⁿ 10, | .000 | \$0.00 | 24,450 | 0 | D | | |

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on February 14, 2014, as amended.
- 2. Each option is immediately exercisable for all option shares, but shares purchased under the option are subject to certain repurchase rights by the Issuer upon the cessation of the Reporting Person's service on the Board of Directors of the Issuer. The shares subject to each option vest in monthly installments upon completion of each month of Board service over a three year period.

Remarks:

/s/ Florence Tam, attorney-in-

08/12/2014

fact

** 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.