FORM 3

87 MARY STREET

GEORGE TOWN E9

(State)

(First)

1. Name and Address of Reporting Person* Casdin Partners GP, LLC

1350 AVENUE OF THE AMERICAS

NY

(City)

SUITE 1140

(Street) **NEW YORK** KY1-9001

(Zip)

(Middle)

10019

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

OMB APPROVAL OMB Number: 3235-0104

			•		5	SECURITIES					d average burden response: 0.5		
			Filed pursuan or Sec	t to tion	Section : 30(h) of	16(a) of the Securities Exchange Act of 194	t of 1934 10			1			
Casdin Capital, LLC			2. Date of Event Requiring Statement (Month/Day/Year) 07/17/2019			3. Issuer Name and Ticker or Trading Symbol Fulcrum Therapeutics, Inc. [FULC]							
(Last) (First) (Middle) 1350 AVENUE OF THE AMERICAS						Relationship of Reporting Persor (Check all applicable) Director X	n(s) to Issue	1)	5. If Amendment, Date of Original Filed (Month/Day/Year)				
SUITE 2600 (Street) NEW YORK NY 10019						Officer (give title below)	Other (specify below)			6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person			
(City) (Stat	re) (Zip)												
		٦	Table I - No	n-E		tive Securities Beneficially							
1. Title of Security (Instr. 4)						Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)				
		(e.				re Securities Beneficially C ants, options, convertible s		s)					
Ex ₁ (Mo			2. Date Exerc Expiration Day/ (Month/Day/	ate		Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	on O	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable		xpiration ate	Title	Amount or Number of Shares	Derivative or					
Series B Preferred S	Stock		(1)		(1)	Common Stock	464,285	(1)		I ⁽²⁾	See footnote.		
1. Name and Address of Casdin Capital,													
(Last) 1350 AVENUE OF SUITE 2600	(First) THE AMERICAS	(Middle)											
(Street) NEW YORK NY 10019													
(City)	(State)	(Zip)											
Name and Address of Casdin Partners	of Reporting Person* <u>Master Fund, L.</u>	<u>P.</u>											
(Last) (First) (Middle) WALKER HOUSE													

(City)	(State)	(Zip)					
Name and Address of Reporting Person* Casdin Eli							
(Last) 1350 AVENUE O SUITE 1140	(First) F THE AMERICAS	(Middle)					
(Street) NEW YORK	NY	10019					
(City)	(State)	(Zip)					

Explanation of Responses:

- 1. The Series B Preferred Stock is convertible into Common Stock on a seven-for-one basis into the number of shares of Common Stock as shown in Column 3 at any time at the holder's election, and automatically upon the closing of the Issuer's initial public offering without payment of further consideration. The shares have no expiration date.
- 2. The securities are owned directly by Casdin Partners Master Fund, LP and may be deemed to be indirectly beneficially owned by (i) Casdin Capital, LLC, the investment adviser to Casdin Partners Master Fund, LP, (ii) Casdin Partners GP, LLC, the general partner of Casdin Partners Master Fund LP, and (ii) Eli Casdin, the managing member of Casdin Capital, LLC and Casdin Partners GP, LLC.

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Each Reporting Person disclaims beneficial ownership in the securities reported on this Form 3 except to the extent of its or his pecuniary interest, if any, therein, and this report shall not be deemed to be an admission that such Reporting Person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

Casdin Partners Master Fund
LP, By: Casdin Partners GP,
LLC, its General Partner, By: 07/17/2019

/s/ Eli Casdin, Managing
Member

Casdin Capital, LLC, By: /s/
Eli Casdin, Managing Member

Casdin Partners GP LLC, By:
/s/ Eli Casdin, Managing
Member
/s/ Eli Casdin
** 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 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.