FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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l	OMB APPROVAL									
l	OMB Number:	3235-028								

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Check this box if no longer subject to 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 an	d Address of		2. Issuer Name and Ticker or Trading Symbol Fulcrum Therapeutics, Inc. [FULC]								Check al	nship of Rep I applicable) Director Officer (give	ŭ	Person(s) to Issuer 10% Owner Other (specify				
(Last) C/O FUL 26 LANI		3. Date of Earliest Transaction (Month/Day/Year) 03/02/2020								X Office (give tide below) below) SVP Clinical Development								
(Street) CAMBRIDGE MA 02139 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye						Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr.				5) S B C	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
					Code	v	Amount	(A) or (D)	Price	т	ransaction(s) nstr. 3 and 4)			(Instr. 4)				
Common	Stock	020	20			S ⁽¹⁾		1,828	D	\$17.25	67(2)	67,100		D				
Common	020	20		S ⁽¹⁾		315	D	\$18.12	55 ⁽³⁾	66,785		D						
		Та	ıble II								oosed of, convertib				ied			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	Execution Date, f any		ransaction code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		te Exer ation E th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price Derivat Securit (Instr. 5	ive derivati y Securit	ve es ially ng ed etion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares					

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 December 19, 2019.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$16.91 to \$17.85, inclusive. The reporting person undertakes to provide to Fulcrum Therapeutics, Inc., any security holder of Fulcrum Therapeutics, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote (2) to this Form 4.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$18.00 to \$18.45, inclusive. The reporting person undertakes to provide to Fulcrum Therapeutics, Inc., any security holder of Fulcrum Therapeutics, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote (3) to this Form 4.

Remarks:

/s/ Peter Thomson, as attorneyin-fact for Diego Cadavid 03/02/2020

** 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.