FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPR	OVAL						
l	OMB Number:	3235-0287						
l	Estimated average burden							
l	hours per response:	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Takimo	Name and Address of Reporting Person* Fakimoto Chris H Last) (First) (Middle) C/O FORTY SEVEN, INC.							Issuer Name and Ticker or Trading Symbol Forty Seven, Inc. [FTSV] Date of Earliest Transaction (Month/Day/Year) 04/04/2019								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Chief Medical Officer				
1490 O'BRIEN DRIVE, SUITE A (Street) MENLO PARK CA 94025 (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - I	Non-Deri	vative	Sec	urit	ies A	cquired	, D	isposed o	of, or B	enefici	ally	Owned					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye						Execution Date		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or			nd 5) Securi Benefi Owned		ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code V		Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 04/04/201						19			М		8,000	Α	A \$2.015		8,000		D			
Common Stock 04/04/201					019	19			S ⁽¹⁾		8,000	000 D \$16.		.3881(2)		0		D		
		1	able								sposed of , converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed tion Date, n/Day/Year)	4. Transa Code (8)		5. Number of		6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amoun or Numbe of Shares							
Stock Option (right to	\$2.015	03/04/2019			M			8,000	(3)		02/25/2026	Common Stock	n 8,000		\$0.00	135,741	ı	D		

Explanation of Responses:

- 1. The sale reported in this Form 4 was effected pursuant to a 10b5-1 trading plan.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$16.09 to \$16.70, inclusive. The Reporting Person undertakes to provide the Issuer, any securityholder of the Issuer, 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
- 3. 1/4th of the shares subject to the option vested one year after February 8, 2016 and 1/48th of the shares subject to the option vest monthly thereafter, subject to Reporting Person's continuous service as of each such date. The shares subject to this option may be exercised prior to vesting, subject to Issuer's right to repurchase.

Remarks:

/s/ John T. McKenna,

Attorney-in-Fact for Chris H. 04/08/2019

Takimoto

** 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.