FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

	OMB APPRO	OVAL						
	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

1. Name and Address of Reporting Person* <u>Vaishnaw Akshay</u>				2. Issuer Name and Ticker or Trading Symbol Editas Medicine, Inc. [EDIT]										ationship o all applic Directo	able)	g Pers	on(s) to Iss		
(Last) (First) (Middle) C/O EDITAS MEDICINE, INC. 11 HURLEY ST.				Date of Earliest Transaction (Month/Day/Year) 06/15/2017 4. If Amendment, Date of Original Filed (Month/Day/Year)									La di	below)	(give title	- Filian	Other (s below)		
(Street) CAMBR (City)		/IA State)	02141 (Zip)						<u> </u>			,	L	ine) X	Form fi Form fi Person	led by One	Repo	(Check Apporting Person	1
1. Title of Security (Instr. 3) 2. Trans. Date				2. Transa	2A. Deemed Execution Date,			quired, Disposed of, or Benefic 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)			ed (A) or	or 5. Amour Securitie Beneficia Owned F		s illy ollowing	Form (D) or	. Ownership orm: Direct D) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	<i>'</i>	Amount	(A) or (D)	(A) or (D) Price		Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)	
			Table II - D (e						uired, Dis , options						wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date if any (Month/Day/Yea	ate, Tr	Code (Instr				6. Date Exercisable Expiration Date (Month/Day/Year)		of Securities		ies g Securit	D	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ow For Dir or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				C	ode	v	(A)	(D)	Date Exercisable		kpiration ate	Title	Amour or Number of Shares	r					
Stock Option (right to buy)	\$15.63	06/15/2017			A		11,538		(1)	06	5/14/2027	Common Stock	11,53	8	\$0	11,538	3	D	

Explanation of Responses:

1. This option was granted on June 15, 2017 and is scheduled to vest in full on June 15, 2018.

/s/ Akshay Vaishnaw

06/19/2017

** 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.