FORM 4

## **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           |  |
| obligations may continue. See          |  |
| Instruction 1(b).                      |  |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |           |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |
| 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

| Name and Address of Reporting Person*     Collins Cynthia  |   |  |  | 2. Issuer Name and Ticker or Trading Symbol Editas Medicine, Inc. [ EDIT ] |   |                              |                                    |                           |   | (Ch                                 | eck all applic                                      | cable)<br>or   |   | Owner                              |  |  |
|--|---|--|--|--|---|------------------------------|------------------------------------|---------------------------|---|-------------------------------------|---|--|---|------------------------------------|--|--|
|  | TAS MEDI  | rst)<br>CINE, INC.                         | (Middle)   |  | 3. Date of Earliest Transaction (Month/Day/Year)  12/06/2018  Officer (give title below)  below)  Other (specify below) |                              |                                    |                           |   |                                     |   |  |   |                                    |  |  |
| 11 HURLEY ST.  |   |  |  | 4.   | 4. If Amendment, Date of Original Filed (Month/Day/Year)  |                              |                                    |                           |   |                                     |   | Individual or Joint/Group Filing (Check Applicable Line)                                     |   |                                    |  |  |
| (Street)   | IDGE M  | A  | 02141  |  |   |                              |                                    |                           |   |                                     |   | X Form fi  | iled by More  | Reporting Per<br>than One Re       |  |  |
| (City)   | (Si   | tate)                                      | (Zip)  |  |   |                              |                                    |                           |   |                                     |   |  |   |                                    |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |   |  |  |  |   |                              |                                    |                           |   |                                     |   |  |   |                                    |  |  |
| Date   |   | Transaction<br>ate<br>lonth/Day/Y          | Execution Day/Year) if any                               |  | Execution Date, Transaction Disposed Of (D) (I  |                              | ties Acquire<br>I Of (D) (Ins      | ed (A) or<br>tr. 3, 4 and |   | es Following (I)                    | orm: Direct<br>D) or Indirect<br>) (Instr. 4)       | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership  |   |                                    |  |  |
|  |   |  |  |  |   | Code V                       | Amount                             | (A) or<br>(D)             | Price   | Reported<br>Transact<br>(Instr. 3 a | ion(s)  |  | (Instr. 4)  |                                    |  |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |  |  |  |   |                              |                                    |                           |   |                                     |   |  |   |                                    |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date<br>if any<br>(Month/Day/Yea | Date, Transaction of Code (Instr. Derivativ                                |   | ve<br>es<br>d<br>ed<br>nstr. | Expiration Date (Month/Day/Year) [ |                           | 7. Title and Amount<br>of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                                     | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownersi<br>Form:<br>Direct (E<br>or Indire<br>(I) (Instr. | Beneficial Ownership ct (Instr. 4) |  |  |
|  |   |  |  | Code   | v   | (A)                          | (D)                                | Date<br>Exercisable       | Expiration<br>Date  | Title                               | Amount<br>or<br>Number<br>of<br>Shares              |  |   |                                    |  |  |
| Stock<br>Option<br>(right to<br>buy)   | \$29.69   | 12/06/2018                                 |  | A  |   | 23,076                       |                                    | (1)                       | 12/05/2028  | Common<br>Stock                     | 23,076  | \$0  | 23,076  | D                                  |  |  |

## **Explanation of Responses:**

1. This option was granted on December 6, 2018 and is scheduled to vest over three years in equal yearly installments of one-third of the shares beginning on December 6, 2019 through December 6, 2021.

/s/ Cynthia Collins

12/10/2018

\*\* 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.