FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
l	OMB Number:	3235-0287							
l	Estimated average burde	en							
l	hours per response:	0.5							

	Check this box if no longer subject to								
١	Section 16. Form 4 or Form 5								
J	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

							011 00(11) 0		investment c		ourly 7 tot 1	0. 20.0							
1. Name and Address of Reporting Person* Hack Andrew A. F.									ker or Tradin	-			Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Hack P	<u>marew F</u>	<u>1. F.</u>							,		-			Direct			10% Ov		
(Look) (Size) (Addelle)						Date o	f Farliest	Trans	saction (Mon	th/Da	v/Year)	\dashv	X Office below			Other (s below)	specify		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 03/01/2017								Chief Financial Officer					
C/O EDITAS MEDICINE, INC.																			
11 HURLEY ST.						f Amo	ndmont [) oto	of Original Fil	lad (N	Aonth/Do	6.1	6. Individual or Joint/Group Filing (Check Applicable						
(0)					- 4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)					
(Street)	IDGE N	ЛΔ	02141											X Form	filed by One	e Repo	orting Perso	n	
CAMBRIDGE MA 02141			02141											Form filed by More than One Reporting Person				rting	
(City)	()	State)	(Zip)											1 0100					
		Tak	ole I - Non	-Deriv	/ative	e Se	curities	s Ac	quired, D	ispo	osed o	f, or Be	neficial	ly Owned	t k				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,			Code (Instr. 5)				ed (A) or tr. 3, 4 and	Benefic Owned	es For ally (D) Following (I)	Form (D) o	Ownership rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code V	, ,	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\)	ate,	4. Transa Code (I 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares	r					
Stock Option (right to buy)	\$24.6	03/01/2017			A		92,500		(1)	02/2	/28/2027	Common Stock	92,500	\$0	92,50	0	D		

Explanation of Responses:

1. This option was granted on March 1, 2017 and is scheduled to vest over four years in equal monthly installments beginning on March 1, 2017 through March 1, 2021.

/s/ Andrew A. F. Hack

03/03/2017

** 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.