# 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

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

			or Section So(n) of the investment Company Act of 1940						
1. Name and Addre Eaton Bruce	ss of Reporting Pers	:on <sup>*</sup>	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Editas Medicine, Inc.</u> [EDIT]		tionship of Reporting Pers all applicable) Director	10% Owner			
(Last) C/O EDITAS M	(First) IEDICINE, INC.	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/09/2023	X	Officer (give title below) EVP, CBO AND	Other (specify below) CTO			
11 HURLEY ST.			4. If Amendment, Date of Original Filed (Month/Day/Year)	vidual or Joint/Group Filing					
				X	Form filed by One Reporting Person				
(Street) CAMBRIDGE	MA	02141			Form filed by More than Person	One Reporting			
(City)	(State)	(Zip)	Rule 10b5-1(c) Transaction Indication	,					
			X Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interest to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.						

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	te Execution Date,		tion 1str.				5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		
Common Stock	05/09/2023		S <sup>(1)</sup>		135	D	<b>\$9.51</b> <sup>(2)</sup>	77,447	D	

## 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 Date, if any (Month/Day/Year)	4. Transac Code (li 8)		Number		6. Date Exerc Expiration Da (Month/Day/N	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

#### Explanation of Responses:

1. Sale was effected pursuant to a durable automatic sales instruction plan adopted by the Reporting Person on June 15, 2019, and represents the sale of shares by the Issuer necessary to meet tax withholding obligations as a result of vesting in restricted stock units on May 6, 2023. The sale does not represent a discretionary trade by the Reporting Person.

2. This transaction was executed in multiple trades at prices ranging from \$9.5100 to \$9.5150. The price reported above reflects the weighted average purchase price. The Reporting Person hereby undertakes to provide upon request, to the SEC staff, the Issuer or a security holder of the Issuer, full information regarding the number of shares and prices at which the transaction was effected.

/s/ Damien Grierson, Attorney-in-Fact

05/11/2023

\*\* 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.

OMB APPROVAL

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