FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasiliigtoii,	D.C.	20049

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

					- 01	Secu	011 30(11)	oi trie	invesime	ni CC	mpany Act	01 1940							
1. Name and Address of Reporting Person* Hopfield Jessica					2. Issuer Name and Ticker or Trading Symbol Editas Medicine, Inc. [EDIT]							5.	5. Relationship of Reporting Person(s) to Issue (Check all applicable)						
				_	O Pote of Facility of Transporting (Martin Paul Very)							\dashv	X	Directo			10% O\	-	
(Last)	(F	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/30/2024										below)	(give title		Other (s below)	specify
C/O EDITAS MEDICINE, INC.,				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
11 HURLEY ST.													X Form filed by One Reporting Person					n	
(Street) CAMBRIDGE MA 02141													Form filed by More than One Reporting Person					rting	
	and the second		02141		Rule 10b5-1(c) Transaction Indication														
(City)	?)	State)	(Zip)			Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Tab	ole I - Nor	n-Deri	vativ	e Se	curitie	s Ac	quired,	Dis	sposed o	of, or Be	eneficia	lly O	wned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					ear)	2A. Deemed Execution Date, if any (Month/Day/Year		e, Transaction Dispose Code (Instr. 5)		n Disposed	rities Acquired (A) ad Of (D) (Instr. 3, 4		4 and Secu Bend Own		urities For (D) ed Following (I) (n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) (D)	Price	1	Reported Transaction(s) (Instr. 3 and 4)			(111341. 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)	lerivative ecurity or Exercise (nstr. 3) Price of Derivative Security Date (Month/Day/Year) Execution Date if any (Month/Day/Year) (Month/Day/Year)				ransaction of ode (Instr. Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		Derivativ Security				10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

1. This option was granted on May 30, 2024 and is scheduled to vest in full on May 30, 2025.

05/30/2024

Remarks:

Stock Option

(right to buy)

/s/ Jessica Hopfield

Common

05/29/2034

06/03/2024

25,000

D

** Signature of Reporting Person

25,000

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.