FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden 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

| | | | | | | | | t Company Ac | t UI 194 | | | | | | |
|---|---|---|--|---|---------------|--------------------------|--|--|---|---|--|--|--|---|--|
| 1. Name ar | nd Address of LC | 2. Issuer Name and Ticker or Trading Symbol Beam Therapeutics Inc. [BEAM] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | | |
| (Last) | (Fi | 3. Date of Ea 08/24/2021 | | sactio | on (M | lonth/Day/Yea | | Officer (give title $f X$ Other (specify below) See Remark 1 | | | | | | | |
| | Δ If Amenda | nent Date | of Ori | idinal | Filed (Month/ | Day/Yea | ar) | 6 Individual or | loint/Group Fil | ing (Check A | nnlicable | | | | |
| (Street) BOSTO | N M. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | |
| (City) | (St | | | | | | | | Perso | | | | | | |
| | | Table | I - Non-Deriva | tive Secur | ities Ac | quire | ed, | Disposed | of, or | Benefi | cially Owne | ed | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Yea | 2A. Deemed Execution I if any (Month/Day | Date, Tra | Transaction Code (Instr. | | 4. Securities Acquired (Disposed Of (D) (Instr. 5) | | i (A) or : 3, 4 and | 5. Amount of Securities Beneficially Owned Following | 6. Owners Form: Dir (D) or Indirect (I (Instr. 4) | ect Indirect Benefic | | |
| | | | | | Co | Code V | | Amount | Amount (A) or (D) Price | | Reported Transaction(s (Instr. 3 and 4 | | | | |
| Common | Stock | | 08/24/2021 | | | J | | 1,615,314 | D | \$0 | 4,611,20 | 5 I | F-Prin Capita Partne Health Fund | al ers | |
| Common | Stock | | 08/24/2021 | | | J | | 16,153 | A | \$0 | 16,153 | I | F-Prin Capita Partne Health Advis V LP ⁰ | al ers ncare ors Fund | |
| Common | Stock | | 08/24/2021 | | | J | | 16,153 | D | \$0 | 0 | I | F-Prin Capita Partne Health Advis V LP ⁰ | al ers ncare ors Fun | |
| Common Stock 08/24/2021 | | | | | | J | | 1,569 | Α | \$0 | 2,293 | I | F-Prin | ne Inc. ⁽¹ | |
| Common Stock 08/24/2021 | | | | | | J | | 969,189 | A | \$0 | 969,342 | I | III Lir | sa Fund nited ership ⁽¹⁾ | |
| Common Stock 08/25/202 | | | 08/25/2021 | | | J | | 969,038 | D | \$0 | 304 | I | III Lir | sa Fund nited ership ⁽¹⁾ | |
| Common Stock 08/25/2 | | | 08/25/2021 | | | J | | 793,736 | A | \$0 | 1,744,22 | 1 I | person entitie shares subject report the | es whose are | |
| | | Tal | ble II - Derivati | | | | | | | | | <u>.</u> I | - | | |
| | | | | ıts, calls, w | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | onversion Date Exercise (Month/Day/Year) if any if | | d 4. Date, Transaction Code (Instr. 8) | | Exp | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | Amo Sec Und Deri Sec | itle and ount of urities lerlying ivative urity (Inst nd 4) | 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. Natu of Indire Benefici Owners (Instr. 4) | |
| | | | and 5) | | | | | | | | | | | | |

| | | Tal | ole II - Derivati (e.g., pu | | | | | ired, Disp options, | convertib | | or i | - 1 | l l | | |
|--|--|--|---|--------------------------------|-----------------|---------------|--------------------------------|--|--------------------------------|--|---|---|--|--|--|
| ESepolamitatio | Price of ings were acqu Derivative | 3. Transaction Date (\$month/Day/Year) iired or disposed of (a | 3A. Deemed Execution Date, if any (Month/Day/Year) s applicable) in the f | Code Transa Code (8) | etion Instr. | Acqu (A) o | vative rities rited r | Date 5xPatisElater Expiration B (Month/Day/ t payment of co | dte Year) | Amou Securi Under Deriva Securi | ities lying itive ity (Instr. | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Disposed 1 1 3 and 4) 1 Reported 1 1 Remark 1: Abigail P. Johnson is a Director, the Chairman and the Chief Executive Officint(p) FMR LLC. Members of the Johnson family, including Abigail P. Johnson Family British P. Johnso | | | | | | | | | | | | | | | |
| | | and its investment in, directly or indirectly | | | | | | | g certain mem Key Expira auth | bers of to the second s | he Johnson Amount or I Meagher Lunder P | family. F-Pri c, <u>Duly</u> owers of | me Inc. is a whol | | |
| Attorney, by and on behalf of 08/26/2021 | | | | | | | | | | | | | | | |

FMR LLC and its direct and indirect subsidiaries, and

Abigail P. Johnson

** 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.