FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ONB APPROVAL									
OMB Number:	3235-0287								
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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

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Name and Address of Reporting Person* <u>Ciaramella Giuseppe</u>						2. Issuer Name and Ticker or Trading Symbol Beam Therapeutics Inc. [BEAM]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					1										Direct			10% Ov	· I		
							2. Data of Farliant Transportion (Month/Day/Year)									(give title		Other (s below)	specify		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 12/12/2022									President & CSO						
C/O BEAM THERAPEUTICS INC.,																					
238 MAIN STREET															C. Individual on Jaint/Craus Filing (Chapter to the						
(0)						4. If Amendment, Date of Original Filed (Month/Day/Year) 12/14/2022									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) CAMBR	IDCE M	ſΑ	02142												X Form	iled by One	Repo	orting Perso	n		
CAMBR	IDGE M	IA	02142													Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ear)	Execu if any	A. Deemed execution Date, any Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Acqu Disposed Of (D) (I 5)				Benefici	es ally following	Form (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	e V	Amour	t	(A) or (D)	Price	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)	Execution Date, if any		4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		of S Und Der	7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e S Ily	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiratior Date	Title	e	Amount or Number of Shares							
Stock Option (Right to Buy) ⁽¹⁾	\$0.67	12/12/2022		1	M ⁽²⁾			18,211	(3)		05/08/202		mmon tock	18,211	\$0.00	9,106	5	D			

Explanation of Responses:

- 1. On December 14, 2022, the reporting person filed a Form 4 which inadvertently attributed a stock option exercise to the incorrect stock option award. The stock option that was the subject of the reported exercise is the stock option award originally reported on September 9, 2021. Accordingly, the first line of Table 2 of this Form 4 reflects this correction.
- 2. The stock option exercise was effected pursuant to a Rule 10b5-1 trading plan.
- 3. The option award vests upon the achievement of a closing price hurdle following Beam Therapeutics Inc.'s initial public offering (which closing price hurdle has been achieved) in three equal installments on December 21, 2021, June 30, 2022 and December 31, 2022.

Remarks:

By: /s/ Christine Bellon, Attorney-in-fact

12/20/2022

** 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.