FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 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

1. Name and Address of Reporting Person*  Walsh Kathleen E				<u>B</u>	2. Issuer Name and Ticker or Trading Symbol     Beam Therapeutics Inc. [ BEAM ]      3. Date of Earliest Transaction (Month/Day/Year)					(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)    Director 10% Owner Officer (give title Other (specif			vner		
(Last)	(F	rst)	(Middle)			06/05/2024						below)		below)	pecity	
C/O BEAM THERAPEUTICS INC. 238 MAIN STREET				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person					
(Street)  CAMBR	IDGE M	A	02142		Ь	ulo 1	10h5 :	1(0)	Transad	etion Ind	ication		Form f Persor		han One Repo	ting
(City)	(S	tate)	(Zip)			Chec	k this box	to indi		nsaction was n	nade pursua			n or written pla	n that is intended	l to
		Tab	le I - Non	-Deri	vativ	e Sec	curities	s Ac	quired, Di	isposed c	f, or Be	neficiall	y Owned			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Date		Date,	Code (Instr.   5)				5. Amou Securitie Beneficia Owned F Reported	s Feally (Dollowing (I)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code V	Amount	(A) or (D) Price		Transact (Instr. 3 a	ion(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 Date, if any (Month/Day/Year	ate,	4. Transaction Code (Instr. 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 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)	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				
Stock Option (Right to Buy)	\$24.49	06/05/2024			A		23,114		(1)	06/05/2034	Common Stock	23,114	\$0	23,114	D	

## Explanation of Responses:

1. The option vests in full on the earlier of the first anniversary of the date of grant and immediately prior to the date of the next year's annual meeting of stockholders, subject to the reporting person's continued service to the board of directors of Beam Therapeutics Inc. through the vesting date.

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

06/07/2024

\*\* 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.