Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

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

| Name and Address of Reporting Person*     Shaw Christi   |                                      |            |          |      |  | 2. Issuer Name and Ticker or Trading Symbol Beam Therapeutics Inc. [BEAM] |      |  |       |  |   |  |   | 5. Relationship of Reporting Person (Check all applicable)   |   |  |  |
|--|--------------------------------------|------------|----------|------|--|---|------|--|-------|--|---|--|---|--|---|--|--|
| (Last)   | (F                                   | irst)      | (Middle) |      | 3. Date of Earliest Transaction (Month/Day/Year) 06/05/2024  |   |      |  |       |  |   |  | Officer<br>below)   | (give title  | Other (s<br>below)  | pecify   |  |
| C/O BEAM THERAPEUTICS INC.,<br>238 MAIN STREET   |                                      |            |          |      | 4. If Amendment, Date of Original Filed (Month/Day/Year)   |   |      |  |       |  |   | Line                                   | · I   |  |   |  |  |
| (Street) CAMBRIDGE MA 02142  |                                      |            |          | -    |  |   |      |  |       |  |   |  | Form filed by One Reporting Person  Form filed by More than One Reporting  Person |  |   |  |  |
| CAMBRIDGE MA 0212  |                                      |            | 02142    | F    | Rule   | 10b5-   | 1(c) | Transa   | actio | on Ind   | ication   |  |   |  |   |  |  |
| (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. |   |      |  |       |  |   |  |   |  |   |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |                                      |            |          |      |  |   |      |  |       |  |   |  |   |  |   |  |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)  |                                      |            |          |      | Execution Date,  |   |      | Transaction Dispose Code (Instr. 5)                      |       | ities Acquired (A) or<br>d Of (D) (Instr. 3, 4 and |   | Beneficia                              | s Fo<br>ally (D<br>following (I)  | orm: Direct<br>) or Indirect<br>(Instr. 4)   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership               |  |  |
|  |                                      |            |          |      |  |   |      | Code   | v     | Amount   | ınt (A) or (D)  |  | Transact<br>(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<br>Derivative<br>Security<br>(Instr. 3)  | ative Conversion Date Execution Date |            |          | Code | action<br>(Instr.  |   |      | 6. Date Exercisable and Expiration Date (Month/Day/Year) |       |  | 7. Title and Amount<br>of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)                               | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |                                      |            |          | Code | v  | (A)   | (D)  | Date<br>Exercisable                                      |       | opiration  | Title   | Amount<br>or<br>Number<br>of<br>Shares |   |  |   |  |  |
| Stock<br>Option<br>(Right to<br>Buy)   | \$24.49                              | 06/05/2024 |          | A    |  | 23,114  |      | (1)  | 06    | 5/05/2034  | Common<br>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.