FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN B

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

OMB APPROVAL

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

											ilpaily Act									
Name and Address of Reporting Person* Burrell Terry-Ann				2. Issuer Name and Ticker or Trading Symbol Beam Therapeutics Inc. [BEAM]								5. Ro (Che	eck all applic Directo	cable) or	g Pers	10% Ow	ner			
(Last)	`	irst) APEUTICS INC.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/31/2023							7	below)	(give title hief Finar	Other (s below) Officer	pecity			
238 MAIN STREET				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	IDGE M	[A	02142											7	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)		Rı	Rule 10b5-1(c) Transaction Indication														
					Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Ins															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution I (a)		ecution Date,		Transaction Disposed Code (Instr. 5)		ties Acquired (A) o i Of (D) (Instr. 3, 4		(A) or 3, 4 and	5. Amou Securitie Beneficia Owned F Reported	es Fo ally (D) Following (I)		n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A (D) or)	Price	Transact (Instr. 3 a	ion(s)		((Instr. 4)		
Common Stock 03/			03/31	/2023			Α		20,000 ⁽¹⁾ A		\$0.00	51,277			D					
	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. Deeme Execution I if any (Month/Day	Date,	4. Transa Code (I		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)		ly Direct or Inc. (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	0 N 0	lumber						
Stock Option (Right to	\$43.45	01/31/2023			Α		20,000		(2)		01/31/2033	Comm		20,000	\$0.00	20,000	0	D		

Explanation of Responses:

- 1. Represents restricted stock units ("RSUs") granted to the Reporting Person under the Beam Therapeutics Inc. ("BEAM") 2019 Equity Incentive Plan. Each RSU represents the contingent right to receive one share of BEAM's common stock. The RSUs vest in four substantially equal annual installments on each of the first four anniversaries of the date of grant, subject to the Reporting Person's continued service with BEAM through each vesting date.
- 2. This stock option vests in equal monthly installments each month following the date of grant for the subsequent 48 months, subject to the Reporting Person's continued service with BEAM through each vesting date.

Remarks:

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

** Signature of Reporting Person Date

03/31/2023

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.