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 0.5 hours per response:

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*  Evans John M.  (Last) (First) (Middle)  C/O BEAM THERAPEUTICS INC.  26 LANDSDOWNE STREET						2. Issuer Name and Ticker or Trading Symbol     Beam Therapeutics Inc. [ BEAM ]  3. Date of Earliest Transaction (Month/Day/Year) 03/31/2021								S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner     X Officer (give title Other (specify below)  CEO				
(Street) CAMBRIDGE MA 02139 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person  ative Securities Acquired, Disposed of, or Beneficially Owned											son	
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				action	ion 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4		(A) or	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and				(Instr. 4)
Common Stock 03/3				03/3	1/2021	1					69,375 <sup>(1</sup>	) A	\$0.00	1,040,3	),332 D		)	
Common Stock														223,000		I		By John M. Evans, III 2018 Irrevocable Trust
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 if any (Month/Da	Date,	4. Transa Code ( 8)		Derivative		6. Date Exercis Expiration Dat (Month/Day/Ye		ite	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)		10. Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership ect (Instr. 4)
					Code	v	(A) (I		Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares	per	(Instr. 4			
Stock Option (Right to Buy)	\$80.04	03/31/2021			A		138,750		(2)		03/31/2031	Common Stock	138,750	\$0.00	138	8,750 Г		

## **Explanation of Responses:**

- 1. Represents restricted stock units ("RSUs") granted to the Reporting Person under the Company's 2019 Equity Incentive Plan. Each RSU represents the contingent right to receive one share of the Company'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 the Company through each vesting date
- 2. The 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 the Company through each vesting date

## Remarks:

By: Christine Bellon, Attorneyin-fact

\*\* Signature of Reporting Person

04/02/2021

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.