FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours per respons	se: 0.5									

	Check this box if no longer subject
$\overline{}$	to Section 16. Form 4 or Form 5
\cup	obligations may continue. See
	Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

						11011	00(11) 0	i tiic i	iiv couriei	11 00	inpany Act C	71 10-10							
Name and Address of Reporting Person* Bhanji Muna				2. Issuer Name and Ticker or Trading Symbol Intellia Therapeutics, Inc. [NTLA]									Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Owner						
(Last)	(Fi	rst) (N	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 07/06/2023									Λ		er (give title		Other (s	- 1
C/O INTELLIA THERAPEUTICS, INC. 40 ERIE STREET, SUITE 130					4. If Amendment, Date of Original Filed (Month/Day/Year)									5. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	(Street) CAMBRIDGE MA 02139													X	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
	IMBRIDGE WIT V2133					Rule 10b5-1(c) Transaction Indication													
(City)	(Si	tate) (Z	ip)		Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). S														
		Table	l - No	n-Derivat	tive Se	ecur	ities	Acq	uired,	Dis	posed of	, or E	3enefi	cially	Owr	ned			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)				//Year) Execution		ution Date,		Transaction Disposed Code (Instr. 5)		ies Acquired (A) Of (D) (Instr. 3,		4 and Secur Benef Owne Follow		cially I ing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)	or Price	e	Reported Transaction(s) (Instr. 3 and 4)					
Common Stock 07/06/20					023				S ⁽¹⁾		1,867	D	\$39	.3(2)	²⁾ 12,526			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 Onte (Month/Day/Year) Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 33. Deemed Execution Date, if any (Month/Day/Year)		ition Date,	4. Transaction Code (Instr. 8)				6. Date Exercisable Expiration Date (Month/Day/Year)		ite	nd 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. 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						

Explanation of Responses:

- 1. The reported sale of 1,867 shares on this Form 4 occurred automatically pursuant to a 10b5-1 trading plan adopted by the reporting person on March 8, 2023.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$38.84 to \$39.74, inclusive. Upon request by the Commission staff, the Company, or a security holder of the Company, the reporting person will provide full information regarding the number of shares sold by the reporting person on July 6, 2023 at each separate price.

Remarks:

/s/ James Basta, attorney-in-

<u>fact</u>

** Signature of Reporting Person Date

07/10/2023

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.