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:								

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). Se	ee Instructio	1 10.																	
Name and Address of Reporting Person*     Lebwohl David				2. Issuer Name and Ticker or Trading Symbol Intellia Therapeutics, Inc. [ NTLA ]							(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				ner			
	ELLIA T	First) HERAPEUTICS ; SUITE 130	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/03/2025						_ [	Officer (give title below)  Officer (give title below)  EVP, Chief Medical Officer				респу		
(Street) CAMBR (City)			02139 (Zip)		4. If <i>i</i>	Amend	ment,	Date o	f Origina	al File	d (Month/Da	y/Year	)	6. Ir Line	) / Form	filed by On-	p Filing (Che e Reporting re than One	Perso	n
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3 5)			Benefic	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	t c	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount	mount (A) or Pr		Price	Transa	Transaction(s) (Instr. 3 and 4)			
Common Stock 01/03/2				2025		S <sup>(1)</sup>		9,557	D \$1		\$12.1	87,666		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)	ivative Conversion Date Execution Date, turity or Exercise (Month/Day/Year) if any Cod		Transa Code (	action (Instr. 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 (Inst 3 and 4)		nstr.	8. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Num of Shar	.					

## **Explanation of Responses:**

1. Represents a mandatory "sell-to-cover" transaction for the purpose of satisfying the reporting person's tax withholding obligation upon the vesting of RSUs on January 1, 2025, and does not represent a volitional trade by the Reporting Person.

James Basta, attorney-in-fact 01/07/2025

\*\* Signature of Reporting Person

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.