FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB Number: Estimated average burden hours per response: 0.5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL

11. Nature

Common Stock 11/03/201					A	_	5,000	(D) A	\$22.0433(1)	(Instr. 3 and 4) 13,400	D			
					Code	v	Amount (A) or (D)		Price	Reported Transaction(s)		(Instr. 4)		
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
		Table I - N	lon-Derivativ	e Securities A	cquire	ed, D	isposed o	of, or E	eneficially	Owned				
(City)	(State)	(Zip)												
CAMBRIDGE MA 02139									Form filed by More than One Reporting Person					
C/O INTELLIA THERAPEUTICS, INC. 40 ERIE STREET, SUITE 130  (Street)			"	Jane	og			,	Line)	Form filed by One	• •			
			4.	If Amendment, Date	of Oria	inal Fi	led (Month/Da	6. Indiv	6. Individual or Joint/Group Filing (Check Applicable					
				1/03/2017					EVP, Chief Financial Officer					
Bell Graeme  (Last) (First) (Middle)				Date of Earliest Tra	nsaction	(Mon	th/Day/Year)	X	below)	below)				
				<u></u>					Director Officer (give title	10% C Other	Owner (specify			
1. Name and Address of Reporting Person*				Issuer Name <b>and</b> T Intellia Therape					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 3A. Deemed 6. Date Exercisable and

5. Number

	(Instr. 3)	Price of Derivative Security	(Montan Day) real)	(Month/Day/Year)	8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(wording a grant of the control of t		Underlying Derivative Security (Instr. 3 and 4)		(Instr. 5)	Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					

## **Explanation of Responses:**

1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$21.85 to \$22.15.

Transaction

## Remarks:

1. Title of

/s/ Jose Rivera, attorney-in-fact 11/03/2017

8. Price of

9. Number of

10.

Ownership Form:

\*\* Signature of Reporting Person Date

7. Title and

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).

3. Transaction

\*\* 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.