FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	$D \subset$	20540	
vasnington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average	e burden								
hours per respons	stimated average burden ours per response: 0.5								

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

1. Name and Address of Reporting Person* <u>Hicks Derek</u>					2. Issuer Name and Ticker or Trading Symbol Intellia Therapeutics, Inc. [NTLA]									all app Direc			10% O	wner	
(Last)	•	irst) ((Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/03/2024									X	below	er (give title v) P, Chief B	usines	Other (s below) as Officer	
		SUITE 130			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable ine)						
(Street)	IDGE M	IA (02139										X		i filed by One Reporting Persor i filed by More than One Repor on				
(City) (State) (Zip) Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												nded to							
		Table	l - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)			Execution Date,		Date,			Disposed C	es Acquired (A) Of (D) (Instr. 3, 4		4 and Securit Benefit Owned		ies cially Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) o (D)	r Price	Trai		orted nsaction(s) tr. 3 and 4)			(Instr. 4)	
Common Stock 01/03/2				2024				S ⁽¹⁾		3,877	D	\$29	.46	36	5,987		D		
		Та	ble II -								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		if any	emed tion Date, n/Day/Year)	4. Transaction Code (Instr. 8)		of	r osed : 3, 4	Expirati	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Date		Amount of Securities Underlying Derivative Security (Ins 3 and 4)		unt per		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y C	0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

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 and January 3, 2024, and does not represent a volitional trade by the Reporting Person.

James Basta, attorney-in-fact 01/05/2024

** Signature of Reporting Person 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.