Edgar Filing: Bell Graeme - Form 4

Bell Graeme													
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March 30, 20	018												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL				
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287					
Check thi if no long	or									Expires:	January 31, 2005		
subject to	MENT OF	F CHANGES IN BENEFICIAL OWN					LOW	NERSHIP OF	Estimated a				
Section 10	SECURITIES							burden hours per					
Form 4 or Form 5		report to S	ection 1	6(a) of t	tha S	Socurit	ios F	vehang	e Act of 1934,	response	0.5		
obligation	¹⁸ Section 17							•	² 1935 or Section	n			
may conti <i>See</i> Instru 1(b).	inue.		of the In	•		•	- ·						
(Print or Type R	Responses)												
1. Name and A Bell Graeme	2. Issuer Name and Ticker or Trading Symbol					ıg	5. Relationship of Reporting Person(s) to Issuer						
			Intellia Therapeutics, Inc. [NTLA]					LA]	(Check all applicable)				
(Last)	(Last) (First) (Middle) 3. Date of Earliest Transaction					()							
			(Month/Day/Year)						Director 10% Owner X Officer (give title Other (specify				
	IE STREET, SU		03/28/20	018					below)	below) bef Financial Of			
(Street)			4. If Amendment, Date Original						6. Individual or Joint/Group Filing(Check				
F				Filed(Month/Day/Year)					Applicable Line)				
CAMBRIDO	GE, MA 02139								_X_ Form filed by C Form filed by M Person				
(City)	(State)	(Zip)	Tabl	e I - Non	-Deri	ivative S	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Da		1					5. Amount of	6. Ownership 7. Nat				
Security (Instr. 3)	(Month/Day/Year	 Execution any 	n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)						Securities Beneficially	Form: Direct Indirect (D) or Benefi	Indirect Beneficial		
(1150.5)			Day/Year) (Instr. 8) (A)				5)	Owned Following Reported Transaction(s)	Indirect (I) (Instr. 4)	Ownership (Instr. 4)			
				Code	V A	mount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	03/28/2018			М			A	\$ 13.48	21,400	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number onof Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	e Expiration I	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to buy)	\$ 13.48	03/28/2018		М	8,000	(1)	01/02/2027	Common Stock	8,000	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Bell Graeme C/O INTELLIA THERAPEUTICS, INC. 40 ERIE STREET, SUITE 130 CAMBRIDGE, MA 02139			EVP, Chief Financial Officer				
Signatures							

Date

/s/Jose E. Rivera, 03/30/2018 Attorney-In-Fact

<u>**</u>Signature of Reporting Person

Explanation of Responses:

* 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).

On January 3, 2017, the Reporting Person was granted an option to purchase 210,000 common shares under the company's 2015(1) Amended and Restated Stock Option and Incentive Plan. The shares reported as being purchased in this Form 4 were fully vested and exercisable as of the transaction date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.