FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Machinatan	D C	20540	
Nashington,	D.C.	20049	

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

1. Name and Address of Reporting Person* <u>Leschly Nick</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol  2seventy bio, Inc. [ TSVT ]								5. Relationship of Reporting Person(s) to Iss (Check all applicable) X Director 10% Ow							
(Last) 60 BINN	(Fi	,	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/03/2024							X Officer (give title Other (specify below)  President and CEO									
(Street)	IDGE M	A 0	2142	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person								
(City)	(Si	ate) (2	Zip)	Ru	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to							ursuant to a								
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Ye	ion 2A. De Execut /Year) if any		eemed ution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			d (A) or	5. Amount of			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Cod	Code V		Amount	()	A) or Price		Rep Trar	Reported Transaction(s) (Instr. 3 and 4)		(,		•	
Common	ommon Stock 01/03/2024		4		S		1)		72,312	2	D	\$3.8685(	2) 1	1,087,030		D				
Common	Common Stock													15,2	233		I	Nick Lesc 2001		
Common Stock															41,0	000		I		chly vocable Trust
		Tal	ble II - Derivat (e.g., p										eneficia ecurities		/ne	d				
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)	ate, Transaction of Code (Instr. Deriv			rities red sed 3, 4	Expiration Date (Month/Day/Year) ities ed			and	Ame Sec Und Deri	itle and bount of urities erlying evative urity (Instr. d 4)	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 Expiration (D) Exercisable Date Title				Amount or Number of Shares									

## Explanation of Responses:

- 1. Shares were sold to cover tax withholding obligations incurred in connection with the vesting of restricted stock units.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$3.83 to \$3.96, inclusive. The Reporting Person will provide, upon request by the SEC, the issuer or security holder of the issuer, full information regarding the number of shares sold at each separate price.

## Remarks:

/s/ Teresa Jurgensen, 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.

- $^{\star}$  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.