Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	20549	
vasilligion,	D.C.	20349	

BENEFICIAL OWNERSHIP

STATEMENT	OF CHANGES	IN

OMB APPROVAL 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

Name and Address of Reporting Person* Leschly Nick					2. Issuer Name and Ticker or Trading Symbol bluebird bio, Inc. [BLUE]									(Che	eck all app Direc	etor		10% Owner		ier		
	JEBIRD E	SIO, INC.	(Midd	lle)	3. Date of Earliest Transaction (Month/Day/Year) 01/10/2022								Office belov	er (give ti v)	tle	Oth belo	er (spe	ecify				
60 BINNEY STREET						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) CAMBRIDGE MA 02142																Y Form	filed by to					
(City)	(S	state)	(Zip)																			
		Tabl	e I -	Non-Deriva	tive	Secu	rities	Acq	uir	ed, [Disp	posed o	f, or	Benefi	cial	ly Own	ed					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Co	Transaction Code (Instr.		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			ed (A) or tr. 3, 4 and	5. Amou Securiti Benefici Owned Followir		s Illy	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Со	de	v	Am		A) or D)	Price		Reported Transacti (Instr. 3 a	ion(s)	ľ				
Common	Stock			01/10/2022	2			S	(1)		2	2,369	D	\$9.402	2 ⁽²⁾	286,	398	1)			
Common Stock 01/11/2		01/11/2022	2			S	(1)		5	5,068	D	\$9.642	6 ⁽³⁾	281,330		D						
Common	Stock															45,6	599		I	Nick Lesc 2001		
Common Stock															123,	000		I		chly vocable Trust		
		Ta	able	II - Derivati (e.g., pu	ve S its, c	ecuri calls, v	ties <i>A</i> varra	cqu nts,	ire op	d, Di tions	ispo s, c	osed of, onvertil	or B	enefic ecurition	ially es)	/ Owne	d					
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)			ecution Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/Dates d					itle and ount of urities lerlying ivative urity (Inst nd 4)	r.	s. Price of Derivative Security Instr. 5)	9. Numb derivativ Securiti Benefici Owned Followir Reporte Transac (Instr. 4)	ve es ially ng ed etion(s)	10. Owners Form: Direct (i or Indire (l) (Insti	hip (E D) (ect (11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Dat	te ercisal		Expiration Date	Title	Amour or Number of Shares	er							

Explanation of Responses:

- 1. Shares were sold to cover tax withholding obligations incurred in connection with the vesting of Restricted Stock Units.
- 2. The range in prices for the transaction reported on this line was \$9.385 to \$9.42. The average weighted price was \$9.4022. 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.
- 3. The range in prices for the transaction reported on this line was \$9.48 to \$9.83. The average weighted price was \$9.6426. 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/ Helen C. Fu, Attorney-in-

01/12/2022

** 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.