FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-OMB Number: 0104 Estimated average burden hours per response: 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

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>bluebird bio, Inc.</u>		Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 10/18/2021 3. Issuer Name and Ticker or Trading Symbol 2seventy bio, Inc. [TSVT]						
(Last) (First) 2SEVENTY BIO, INC.	(Middle)			4. Relationship of Reportin Issuer (Check all applicable)	•	.,		f Amendment, ed (Month/Day/	Date of Original Year)
60 BINNEY STREET		m		Director Officer (give title below)		6 Owner er (specify ow)	(Ch	eck Applicable Form filed	oint/Group Filing te Line) by One Reporting
(Street) CAMBRIDGE MA	02142							Person	by More than One Person
(City) (State)	(Zip)								
	Ta	ble I - Non	-Derivati	ve Securities Benefi	cially	Owned			
1. Title of Security (Instr. 4)									
1. Title of Security (Instr. 4	()			2. Amount of Securities Beneficially Owned (Instr. 4)	Form (D) o	vnership n: Direct r Indirect nstr. 5)		ature of Indire ership (Instr.	
Title of Security (Instr. 4 Common Stock)) 			Beneficially Owned (Instr.	Form (D) o	n: Direct r Indirect			
	,) Perivative	Beneficially Owned (Instr. 1)	Form (D) or (I) (In	Direct r Indirect estr. 5) D vned	Own		
	(e.g		Perivative ls, warrar	Beneficially Owned (Instr. 4) 100 Securities Benefici	Form (D) or (I) (In	Direct r Indirect estr. 5) D wned ecurities) sion		

Explanation of Responses:

Remarks:

By: /s/ Helen Fu, VP, **Chief Corporate Counsel** 10/18/2021 of bluebird bio, Inc.

** Signature of Reporting

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 5 (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.