FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

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1. Name and Address of Reporting Person* <u>Davidson David</u>							2. Issuer Name and Ticker or Trading Symbol bluebird bio, Inc. [BLUE]								all appli Directo	or	g Perso	10% Ov	vner
	(First) (Middle) BLUEBIRD BIO, INC. NNEY STREET						3. Date of Earliest Transaction (Month/Day/Year) 06/06/2019								X Officer (give title Other (specify below) Chief Medical Officer				
(Street) CAMBRIDGE MA 0214				2	_	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	<i>'</i>				
(City)	(S		(Zip)	Nan Davis		- 6	4 :	4		- d D	·	-4 - u F	200060	:-!!	0				
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,		ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and				5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	ction(s)			(Instr. 4)	
Common Stock 06/06						9			M		5,060	A	\$50.	\$50.51		36,676		D	
Common	06/06/20	06/06/2019				S ⁽¹⁾		2,216	D	\$121.6	306 ⁽²⁾	34	1,460		D				
Common Stock 06/06)19				S ⁽¹⁾		1,344	D	\$122.43	.4332 ⁽³⁾ 3		33,116		D	
Common Stock 06/06/2						19			S ⁽¹⁾		1,500	D	\$124.2294(4)		31,616			D	
		7	able								sposed of				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exect if any	eemed ution Date, th/Day/Year)	4. Transa Code (8)	5. Number		Expir	te Exer ation D th/Day/				I 8. De Se (In Security		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amou or Numb of Share	er					
Stock Option (right to	\$50.51	06/06/2019			M			5,060	((5)	03/01/2026	Commo		0	\$0.00	27,075	,	D	

Explanation of Responses:

- $1.\ The\ sales\ reported\ in\ this\ Form\ 4\ were\ effected\ pursuant\ to\ a\ Rule\ 10b5-1\ trading\ plan\ adopted\ by\ the\ reporting\ person\ on\ January\ 10,\ 2019.$
- 2. The range in prices for the transaction reported on this line was \$121.11 to \$122.05. The average weighted price was \$121.6806. 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 \$122.145 to \$122.85. The average weighted price was \$122.4332. 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.
- 4. The range in prices for the transaction reported on this line was \$123.91 to \$124.79. The average weighted price was \$124.2294. 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.
- 5. This option vests over a four-year period, at a rate of twenty-five percent (25%) on January 4, 2017 and in 36 equal monthly installments thereafter.

Remarks:

/s/ Jason F. Cole, Attorney-in-06/10/2019 Fact

** 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.