FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	20540	
wasiiiigtoii,	D.C.	20549	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-028									
Estimated average burden									
hours per response: 0.									

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

1. Name and Address of Reporting Person* <u>Marrazzo Jeffrey D</u>					2. Issuer Name and Ticker or Trading Symbol Prime Medicine, Inc. [PRME]							(Ch	telationship eck all appli X Directo	,	g Pers	son(s) to Iss 10% Ow			
(Last)	(Fi	rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/10/2023								Officer below)	(give title		Other (s below)	pecify	
C/O PRIME MEDICINE, INC. 21 ERIE STREET				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person							
(Street)	IDGE M	A	02139				Form filed by More than One Reporting Person										rting		
(City)	(Si	<i>,</i>	(Zip)			Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			action	ction 2A. Deemed Execution Date,		3. Transacti Code (Ins	4. Securities		of, or Beneficia ities Acquired (A) or d Of (D) (Instr. 3, 4 ar		5. Amou Securiti Benefic Owned	int of es ially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
					Code	v	Amount	mount (A) or (D)		Transac	Reported Transaction(s) (Instr. 3 and 4)			Instr. 4)					
		Т							uired, Dis , options					Owned					
Derivative Conversion Date Execution Date, To Courty or Exercise (Month/Day/Year) if any			ransaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)						
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares						
Stock Option (right to buy)	\$14.04	05/10/2023			A		92,000		(1)	05/	/10/2033	Common Stock	92,000	\$0	92,000		D		

Explanation of Responses:

1. The shares underlying this option shall vest in three equal annual installments beginning on May 10, 2024, subject to the Reporting Person's continued service on each such vesting date.

Remarks:

/s/ Marishka DeToy, attorneyin-fact

05/12/2023

** 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.