FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OMB APP	ROVAL
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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* Fischesser Ryan					2. Issuer Name and Ticker or Trading Symbol Caribou Biosciences, Inc. [CRBU]							(Ch	eck all applic Directo	ionship of Reporting I all applicable) Director Officer (give title		on(s) to Issu 10% Ov Other (s	ner	
	RIBOU BIC	irst) OSCIENCES, IN SUITE 105	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/20/2021								below)		e and	below) Controlle	`
(Street) BERKEI (City)	LEY C.		94710 (Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	e) <mark>X</mark> Form fi Form fi	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Trans Date			nsactio			3. Transaction Code (Instr. 3, 4		d (A) or	or 5. Amount		Form (D) o		. Nature of ndirect Beneficial Ownership					
Code V Amount (A) or (D)								Price	Transact	Transaction(s) (Instr. 3 and 4)			(Instr. 4)					
Common Stock 12/2				20/20	0/2021		p (1)		1,136	1,136 A \$2		(2) 101	101,695		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, Tracecurity or Exercise (Month/Day/Year) if any Co		Transa Code (nsaction Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and of Securitie Underlying Derivative s (Instr. 3 and		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		Transacti (Instr. 4)	ion(s)		
Option to purchase Common Stock	\$2.69 ⁽²⁾	12/20/2021			X			1,136	(3)		03/18/2029	Common Stock	1,136	\$0.00	7,384	4	D	
Option to purchase Common Stock	\$15.16	12/20/2021			A		40,000		(4)		12/19/2031	Common Stock	40,000	\$0.00	40,00	00	D	

Explanation of Responses:

- 1. These shares were acquired pursuant to the exercise of a stock option, as reported in Table II below.
- $2. \ The exercise price for this stock option was incorrectly reported as $2.68 \ per share on the reporting person's Form 3 filed on July 23, 2021.$
- 3. The shares subject to this option have vested or will vest in equal monthly installments until the option is fully vested on January 1, 2023, subject to the reporting person's continued service to the Issuer through the applicable vesting dates.
- 4. The shares subject to this option will vest in equal monthly installments starting on the first monthly anniversary of the grant date until the option is fully vested on December 20, 2025, subject to the reporting person's continued service to the Issuer through the applicable vesting dates.

Remarks:

/s/ Barbara G. McClung as, attorney-in-fact ** Signature of Reporting Person

12/21/2021

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.