SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** SECURITIES

OMB APPROVAL

3235-OMB Number: 0104

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

1. Name and Address of Reporting Person <sup>*</sup> Long-McGie Jeffrey Stephen	2. Date of E Requiring St (Month/Day/ 07/22/202	tatement 'Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Caribou Biosciences, Inc.</u> [ CRBU ]					
(Last) (First) (Middle) C/O CARIBOU BIOSCIENCES, INC.			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)		
2929 7TH STREET, SUITE 105			Officer (give title below)		(specify	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) BERKELEY CA 94710								by More than One Person
(City) (State) (Zip)								
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. I)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned(e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4)	2. Date Exerci Expiration Da (Month/Day/Y	te	3. Title and Amount of Se Underlying Derivative Se (Instr. 4)		4. Conversi or Exerci Price of	ise Form:	Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	re ∣o	Direct (D) or Indirect I) (Instr. 5)	
Explanation of Responses:								

**Remarks:** 

No securities are beneficially owned.

/s/ Jeffrey Long-McGie

07/22/2021

\*\* 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 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.