FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
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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* Novak Rodger						2. Issuer Name and Ticker or Trading Symbol CRISPR Therapeutics AG [CRSP]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					٦										Directo	r	10% Owner		/ner		
(Last)	,	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/22/2017									Officer (give title below) Chief Executive			Other (s	pecify		
C/O CRISPR THERAPEUTICS AG					100	00/22/2017									Ciliei Executive			Officer			
AESCHENVORSTADT 36																					
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) 4051 BASEL V8															X Form filed by One Reporting Person						
4031 DA	JEL V				_										Form filed by More than One Reporting						
(City) (State) (Zip)															Person						
		Tab	le I - N	Non-Deri	ivativ	e Sec	urit	ies Ad	quire	ed, D	isposed o	f, or B	eneficial	ly O	vned						
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Day (Year) if any		ecution Date,		ction Instr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Benefic Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price	т	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Shares 06/22/20					2017	17			M		10,825	A	\$1.81	1,22		25,830		D			
Common Shares 06/22/2				2017	17			S ⁽¹⁾		10,825	D	\$15.3707	3707 ⁽²⁾		1,215,005		D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
					_	cans	_		_												
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code (8)			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title a of Secu Underly Derivati (Instr. 3			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	Amount or Number of Shares								
Stock Options (Right to	\$1.81	06/22/2017			M			10,825	(3	3)	09/10/2025	Commo Shares		\$0	0.00	68,093	3	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.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$15.01 to \$15.59, inclusive. The reporting person undertakes to provide to CRISPR Therapeutics AG, any security holder of CRISPR Therapeutics AG, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each
- 3. This option was granted on September 10, 2015 with respect to 268,093 Common Shares with 94,950 shares immediately vested on the grant date and the remaining 173,143 shares vest in 31 equal monthly installments thereafter.

Remarks:

/s/ Michael Esposito, attorney-

06/23/2017

in-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.