SEC Form 4	
FORM 4	

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL

OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

Section obligat	this box if no lo n 16. Form 4 or ions may contii tion 1(b).		STA		ed pu	ursuani	t to Sectio	n 16(a	a) of the Se	ecuriti	NEFICI ies Exchar mpany Act	nge Act	of 19		ΗP	Estim	Numbe ated av per res	erage burder	0.5	
1. Name and Address of Reporting Person* Galimi Francesco					2. Issuer Name <b>and</b> Ticker or Trading Symbol Adicet Bio, Inc. [ ACET ]									(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) C/O ADI	st) (First) (Middle) O ADICET BIO, INC.				3. Date of Earliest Transaction (Month/Day/Year) 01/24/2024									X Officer (give title Other (specify below) below) SVP & Chief Medical Officer						
200 BERKELEY STREET, 19TH FLOOR					4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	-)						
(Street) BOSTON MA 02116														X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State) (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.											o satisfy								
		Та	ble I - Noi	n-Deriv	/ativ	ve Se	curitie	s Ac	quired,	Dis	posed c	of, or	Ben	eficially	Owned		4			
Dat				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Code (Inst							Form (D) or	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount		A) or D)	Price	Transaction(s) (Instr. 3 and 4)				(11311.4)		
Common Stock				01/24/2024				<b>F</b> <sup>(1)</sup>		4,957		D	\$2.4	75,	75,501		D			
Common Stock 01/				01/24	24/2024				A 26,		26,300	300 <sup>(2)</sup> A		\$0.00	101,801			D		
			Table II -								osed of, converti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, Ti	Code (Instr.		5. Number Derivative Securitie Acquired or Dispo of (D) (In 3, 4 and	re es d (A) sed str.	6. Date Exercisable and Expiration Date (Month/Day/Year)			of Sec Under	curities lying ative S	ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti	e Owner s Form: ally Direct or Indi g (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Ca	ode	v	(A)	(D)	Date Exercisab		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)				
Stock Option (Right to	\$2.4	01/24/2024			A		288,134		(3)	0	)1/23/2034	Comm Stoc		288,134	\$0.00	288,1	34	D		

## Explanation of Responses:

Buy)

1. Represents shares withheld by the Issuer to satisfy tax withholding obligations in connection with the vesting of restricted stock units and does not represent a sale by the Reporting Person.

2. The Reporting Person was issued RSUs. Each RSU represents a contingent right to receive one share of Common Stock. The RSUs shall vest in three (3) annual installments, with the first tranche vesting on January 24, 2025. The RSUs may be settled only by delivering shares of Common Stock, and thus, the grant is being reported in Table I as allowed per SEC guidance.

3. 1/48th of the shares shall vest on each of the next forty-eight (48) monthly anniversaries of the grant date, provided that the Reporting Person maintains a service relationship with the Issuer as of the applicable vesting dates.



\*\* Signature of Reporting Person

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.

Date