FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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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

Name and Address of Reporting Person* Tsai John						2. Issuer Name and Ticker or Trading Symbol Blueprint Medicines Corp [BPMC]									(Che	Relationship of Reporting Person (Check all applicable) Director				vner
(Last)	(F	irst)	(Middle)				e of Earliest Transaction (Month/Day/Year) /2024								Officer below)	(give title		Other (s below)	specify	
45 SIDNEY STREET					4. I1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) CAMBRIDGE MA 02139														N.	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)					Rı	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-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date			e, Transaction Dispose Code (Instr. 5)			rities Acquired (A) or ed Of (D) (Instr. 3, 4 a				es ally Following	Form (D) o	n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									-	Code	v	Amount	(A) (D)	or F	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock 06/12/				2/202	/2024				A ⁽¹⁾		2,24	2,242 A		\$ <mark>0</mark>	8,	8,742		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)	vative Conversion Date Execution irity or Exercise (Month/Day/Year) if any			Date, Trans Code			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expi	ate Exer iration D nth/Day/	ate	Amount of		urity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	e rcisable		opiration	Title	or Nui of	mber ares					
Stock Option (Right to Buy)	\$106.14	06/12/2024			A		4,570			(2)	06	5/12/2034	Common Stock	4,	570	\$0	4,570		D	

Explanation of Responses:

1. The reported transaction involved the Reporting Person's receipt of a grant of restricted stock units. The restricted stock units vest with respect to 100% of the shares underlying the restricted stock units on the earlier of (i) June 12, 2025 and (ii) the next annual meeting of the Issuer's stockholders. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.

2. This option vests with respect to 100% of the shares underlying the option on the earlier of (i) June 12, 2025 and (ii) the next annual meeting of the Issuer's stockholders.

<u>/s/ Melissa Masse</u> <u>06/14/2024</u>

** 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.