FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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| OMB APP | ROVAL |
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| OMB Number: | 3235-0287 |
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| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: Estimated average b | 323 |
|--|------------------------------------|-----|
| Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 | hours per response: | |
| or Section 30(h) of the Investment Company Act of 1940 | | |

| defense | ed to satisfy the e conditions of ee Instruction | Rule 10b5- | | | | | | | | | | | | | | | | |
|---|--|------------|------------------|---|--|------|--|------|--------------------|--|--|--|-----------------------|--|--|---|---|-------------|
| 1. Name and Address of Reporting Person* ANG ROBERT | | | | | 2. Issuer Name and Ticker or Trading Symbol Vor Biopharma Inc. [VOR] | | | | | | | | | Check all a | pplicable) ector | , | | ssuer |
| (Last) (First) (Middle) C/O VOR BIOPHARMA INC. 100 CAMBRIDGEPARK DRIVE, SUITE 101 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/03/2024 | | | | | | | | | be | Officer (give title below) PRESIDENT | | Other (specification) AND CEO | | |
| (Street) CAMBR (City) | | | 2140 Zip) | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ine) Fo | | | | |
| (- 3) | (- | | | n-Deriva | ative \$ | Secu | rities | Acq | uired, | Dis | posed of | , or B | enefic | ially Ow | ned | | | |
| Date | | | | 2. Transac Date (Month/Da | (Day/Year) Exec | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | es Acquired (A Of (D) (Instr. 3, | | and Sec Ben Owr | mount of urities eficially ed Following | For (D) | Ownership m: Direct or Indirect Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) (D) | Pric | Tran | orted saction(s) r. 3 and 4) | | | (111511. 4) |
| Common Stock 09/03 | | | | | 2024 | | | | F | | 12,657(1 | D | \$0 | .83 | 792,599 | | D | |
| | | Tal | | | | | | | | | osed of, convertib | | | | ed | | | |
| 1. Title of Derivative Security (Instr. 3) | rivative curity or Exercise Price of Derivative Security Date (Month/Day/Year) Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Roughless (Month/Day/Year) Security | | Transa Code (| | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirec Beneficia Ownershi (Instr. 4) | | |
| | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | | Amount or Number of Shares | | | | | | | |

Explanation of Responses:

1. Shares were withheld to satisfy the Reporting Person's tax withholding obligations in connection with the settlement of restricted stock units.

/s/ Katie Kazem, Attorney-in-

Fact

09/04/2024 ** 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.