

DICERNA PHARMACEUTICALS INC

Reported by **HOFFMAN STEPHEN J**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 07/24/17 for the Period Ending 07/18/17

Address 87 CAMBRIDGEPARK DRIVE

CAMBRIDGE, MA 02140

Telephone 617 621 8097

CIK 0001399529

Symbol DRNA

Fiscal Year 12/31





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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *					2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
HOFFMAN	STEPH	EN J					ırmace					X Director	, ,		10% Owner		
(Last) (First) (Middle)			3.	3. Date of Earliest Transaction (MM/DD/YYYY)							Officer (give title below) Other (specify below)						
C/O DICER INC., 87 CA							7/1	8/201	17								
111C., 07 CF	(Str		K DKI V		If An	nendmei	nt, Date (Origina	l Fil	ed (MM/E	D/YYYY)	6. Individual	or Joint/G	roup Filing	(Check Appl	icable Line)	
CAMBRIDGE, MA 02140													X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
((City) (St	ate) (Zi	ip)										THOIC MAIN	one reporting r			
			Table I -	Non-De	rivat	ive Secu	rities Ac	equired	d, Di	isposed o	of, or Be	eneficially Own	ed				
1. Title of Security (Instr. 3) 2. Trans. I			Trans. Date			(Instr. 8) or I (Ins		or Dis	Disposed of (D) tr. 3, 4 and 5)		ollowing Reported Transaction(s) onstr. 3 and 4) Ownership Form: Benet Direct (D) Ownership		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
	Tab	ole II - Der	ivative Se	ecurities	Bene	ficially	Owned (1			arrants	, options, conve	rtible sec	curities)	1 /	l	
1. Title of Derivate Security (Instr. 3)	Conversion or Exercise Price of Derivative	;	3A. Deeme Execution Date, if any	(Instr. 8)		e 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)					7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			9. Number of derivative Securities Beneficially Owned	10. Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security			Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)		
Director Stock Option (right to buy)	\$3.42	7/18/2017		A		25000		(1)	1	7/18/2027	Commo Stock	n 25000	\$0.00	25000	D		

Explanation of Responses:

(1) This option vests monthly over 12 months from July 11, 2017 in substantially equal monthly installments, subject to the Reporting Person's continued service to the Issuer through each such date.

Reporting Owners

Reporting Owners									
Reporting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
HOFFMAN STEPHEN J									
C/O DICERNA PHARMACEUTICS, INC.	X								
87 CAMBRIDGEPARK DRIVE	1.								
CAMBRIDGE, MA 02140									

Signatures

/s/ Kerry Kenny, Attorney-in-Fact for Stephen Hoffman

**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 control number.