FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
hours per response: 0						

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Instruct	ion 1(b).		Filed							ecurities Exc nt Company									
Name and Address of Reporting Person* Bain Capital Life Sciences Investors, LLC				2. Issuer Name and Ticker or Trading Symbol Dicerna Pharmaceuticals Inc [DRNA] 3. Date of Earliest Transaction (Month/Day/Year) 05/29/2019									S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner Officer (give title Other (specify below) below)					wner (specify	
(Last) 200 CLA	(Fir	,	Middle)	4. If A	me	endmen	t, Date	of C	Drigin	al Filed (Mon	th/C	Day/Ye	ar)	6. Individual Line)	or Joir	·	•	Check i	Applicable
(Street) BOSTON MA 02116				Form filed by One Reporting Person X Form filed by More than One Reporting Person															
(City)	(St	ate) (Z	Zip)																
		Tabl	e I - Non-Deriv	ative S	Se	curitie	s Ac	qui	red	, Dispose	d o	f, or	Benefi	cially Own	ed				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deem Execution if any (Month/D		n Date,	Cod	Transaction Code (Instr.		4. Securities Ad Disposed Of (D and 5)				5. Amount of Securities Beneficially Owned		6. Ownership Form: Direct (D) or Indirect (I)		Indirect Beneficial Ownership (Instr.		
						Cod	Code		Amount	- [•	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		4)		
Common Stock		05/29/2019				S ⁽¹⁾			1,600,00	0	D	\$12.5	7,330,237		I		See footnotes(2)(3)(4)		
		Та	ble II - Derivat e.g., pu)				•			Disposed on the converge of th				•	i				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		4. Transac Code (Ir 8)		n of r. Deri Secu Acq (A) o Disp	osed 0) tr. 3, 4	Ex (M	pirat	Exercisable a ion Date /Day/Year)	and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		of der Security (Instr. 5) Own		curities Fo neficially Di vned or		rm: Beneficial Ownership Indirect (D) Indirect (Instr. 4)	
				Code		/ (A)	(D)	Da Ex	ite ercis	Expirate Date	ion	Title	Amou or Numb of Shares	er					
		Reporting Person	Investors, LL	<u>C</u>	_														
(Last) 200 CLA	ARENDON !	(First) STREET	(Middle)																
(Street)	N	MA	02116																
(City)		(State)	(Zip)																

1. Name and Address of Reporting Person*									
Bain Capital Life Sciences Partners, LP									
-									
(Last)	(First)	(Middle)							
200 CLARENDON STREET									
(Street)									
BOSTON	MA	02116							
(City)	(State)	(Zip)							
Name and Address of Reporting Person*									
Bain Capital Life Sciences Fund, L.P.									
(Last)	(First)	(Middle)							
200 CLARENDON									
(Street)									
BOSTON	MA	02116							
(City)	(State)	(Zip)							
Name and Address	of Donorting Domon*								
	ences Associate	c I D							
DOIF LITE SCIE	HICES ASSOCIATE	5, LF							
(Last)	(First)	(Middle)							
200 CLARENDON		(Middle)							
200 CLAKENDON	SIKEEI								
(Street)									
BOSTON	MA	02116							
(City)	(State)	(Zip)							
1. Name and Address	of Reporting Person*								
Schwartz Jeffrey Lawrence									
John Marke John	<u> </u>								
(Last)	(First)	(Middle)							
200 CLARENDON	ISTREET	,							
(Street)									
BOSTON	MA	02116							
(City)	(State)	(Zip)							
Name and Address of Reporting Person*									
Koppel Adam	, 5								
(Last)	(First)	(Middle)							
200 CLARENDON STREET									
(Street)									
BOSTON	MA	02116							
(City)	(State)	(Zip)							

Explanation of Responses:

1. On May 29, 2019, Bain Capital Life Sciences Fund, L.P. ("BC LS") and BCIP Life Sciences Associates, LP ("BCIP LS" and, together with BC LS, the "Bain Life Sciences Entities") sold 1,447,289 and 152,711 shares of common stock, respectively, directly to a private investor.

^{2.} Dr. Koppel is a director of the Issuer.

^{3.} Bain Capital Life Sciences Partners, LP ("BC LS P") is the general partner of BC LS. As a result, BC LS P may be deemed to share voting and dispositive power with respect to the securities held by BC LS. BC LS P disclaims beneficial ownership of such securities except to the extent of its pecuniary interest therein.

4. Bain Capital Life Sciences Investors, LLC ("BCLLS"), whose managers are Jeffrey Schwartz and Adam Koppel, is the general partner of BC LS P and governs the investment strategy and decision-making process with respect to investments held by BCIP LS, whose general partner is Boylston Coinvestors, LLC. As a result of the relationships described herein, each of BCLS, Mr. Schwartz and Dr. Koppel may be deemed to share voting and dispositive power with respect to the securities held by the Bain Life Sciences Entities. BCLS, Mr. Schwartz and Dr. Koppel each disclaim beneficial ownership of such securities except to the extent of their pecuniary interest therein.

Remarks:

BAIN CAPITAL LIFE SCIENCES INVESTORS, 05/31/2019 LLC, By: /s/ Adam Koppel, **Managing Director BAIN CAPITAL LIFE** SCIENCES PARTNERS, LP, By: Bain Capital Life 05/31/2019 Sciences Investors, LLC, its general partner, By: /s/ Adam Koppel, Managing Director **BAIN CAPITAL LIFE** SCIENCES FUND, L.P., By: **Bain Capital Life Sciences** Partners, LP, its general 05/31/2019 partner, By: Bain Capital Life Sciences Investors, LLC, its general partner, By: /s/ Adam Koppel, Managing Director **BCIP LIFE SCIENCES** ASSOCIATES, LP, By: Boylston Coinvestors, LLC. 05/31/2019 its general partner, By: /s/ Adam Koppel, Authorized **Signatory** /s/ Jeffrey Schwartz 05/31/2019 /s/ Adam Koppel 05/31/2019 ** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).