KOZIN MARC D				
Form 3				
January 25, 2019				
FORM 3	UNITED STATES SECURITIES AND EXCHANGE COMMISSION	OMB AF	PROVAL	
	Washington, D.C. 20549	OMB Number:	3235-0104	
	INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES	Expires:	January 31, 2005	
	SECONTIES		Estimated average	

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> KOZIN MARC D		2. Date of Event RequiringStatement(Month/Day/Year)	g 3. Issuer Name and Ticker or Trading Symbol Dicerna Pharmaceuticals Inc [DRNA]			
(Last)	(First)	(Middle)	01/23/2019	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)	
C/O DICERNA PHARMACEUTICALS, INC., 87 CAMBRIDGEPARK DRIVE			(Check all applicable)	Thed(holds/Duj/Tear)		
			X_ Director 10% Owne	r		

(Street)

CAMBRIDGE, MAÂ 02140

(State)

(City)

Table I - Non-Derivative Securities Beneficially Owned

(give title below) (specify below)

burden hours per

0.5

response...

6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting

Form filed by More than One

Person

Reporting Person

1.Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	5,000	Ι	By Marc D. Kozin Revocable Trust

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

(Zip)

SEC 1473 (7-02)

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.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership

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(Month/Day/Year)		Derivative S (Instr. 4)	ecurity	or Exercise Price of	Form of Derivative	(Instr. 5)
Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	

Reporting Owners

Reporting Owner Name / Address		Relationships			
		Director	10% Owner	Officer	Other
KOZIN MARC D C/O DICERNA PHARMACEUTICA 87 CAMBRIDGEPARK DRIVE CAMBRIDGE, MA 02140	LS, INC.	ÂX	Â	Â	Â
Signatures					
/s/ John B. Green, attorney-in-fact	01/25/2019)			
**Signature of Reporting Person	Date				
Explanation of Respo	onses:				

* If the form is filed by more than one reporting person, *see* Instruction 5(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).

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Remarks:

Exhibit 24 - Power of Attorney

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.