Dicerna Pharmaceuticals Inc

Form 4 February 20, 2014

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

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if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Print or Type Responses)

C/O DICERNA

(City)

Stock

1(b).

1. Name and Address of Reporting Person * MADDEN DAVID

2. Issuer Name and Ticker or Trading Symbol

Issuer

Dicerna Pharmaceuticals Inc

[DRNA]

(Check all applicable)

5. Relationship of Reporting Person(s) to

(Last) (First) 3. Date of Earliest Transaction (Month/Day/Year)

X_ Director Officer (give title

10% Owner Other (specify

09/24/2013

(Middle)

(Zip)

PHARMACEUTICALS, INC., 480 ARSENAL STREET, BLDG 1, **SUITE 120**

(Street)

(State)

01/29/2014

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check Applicable Line)

X Form filed by One Reporting Person

D

Filed(Month/Day/Year)

Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

WATERTOWN, MA 02472

1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities on(A) or Disp (Instr. 3, 4	posed o	of (D)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	01/24/2014		M	112,511	A	\$ 3.42	112,511	D	
Common	01/20/2014		D	7.500		¢ 15	120.011	D	

7.500

Α

\$ 15

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

P

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120,011

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number.

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number of iorDerivative & Acquired (A Disposed of (Instr. 3, 4,	Securities A) or f (D)	6. Date Exer Expiration D (Month/Day/	ate	7. Title and A Underlying S (Instr. 3 and	Seci
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	A N Sl
Employee Stock Option (right to buy)	\$ 3.42	01/24/2014		M		1,200	<u>(1)</u>	06/02/2019	Common Stock	
Employee Stock Option (right to buy)	\$ 3.42	01/24/2014		M		1,311	(2)	10/14/2020	Common Stock	
Employee Stock Option (right to buy)	\$ 3.42	01/24/2014		M		110,000	(3)	09/24/2023	Common Stock	1
Employee Stock Option (right to buy)	\$ 3.42	09/24/2013		A	110,000		(3)	09/24/2023	Common Stock	1

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Fallicy Fadaress	Director	10% Owner	Officer	Other		
MADDEN DAVID C/O DICERNA PHARMACEUTICALS, INC. 480 ARSENAL STREET, BLDG 1, SUITE 120 WATERTOWN, MA 02472	X					
0 ' '						

Signatures

/ s John Green	02/20/2014		
**Signature of Reporting Person	Date		

Reporting Owners 2

Explanation of Responses:

- * 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).
- (1) 25% vests after the 1 year anniversary of vesting start date of 6/2/09 and the remaining 75% vests at 1/36 per month thereafter.
- (2) 25% vests after the 1 year anniversary of vesting start date of 8/5/11 and the remaining 75% vests at 1/36 per month thereafter.
- (3) Vests 1/36 monthly on last day of each month with a vesting start date of 07/30/2013.

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.