## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20049	

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

Check this box if no longer subject to 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 intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Instruct	tion 10.																			
1. Name and Address of Reporting Person* Friedl-Naderer Johanna					2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Dyne Therapeutics, Inc.</u> [ DYN ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
Triedi-Naderer Johanna														Directo						
															Oπicer below)	(give title		Other (s below)	pecity	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 12/04/2024									Chief Commercial Officer					
C/O DYNE THERAPEUTICS, INC.				12/	12/04/2024															
1560 TRAPELO ROAD																				
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)															Line)  Form filed by One Reporting Person					
WALTH	AM M	ΙA	02451												Form filed by More than One Reporting					
,															Person		C triai	TOTIC TROPOL	ung	
(City)	(S	tate)	(Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of S	Security (Ins	tr. 3)		2. Transa	action		2A. Deem	ed	3.		4. Securi	ties Acqui	red (	(A) or	5. Amou	nt of	6. Ov	vnership	7. Nature	
	, , ,			Date (Month/E	)av/Ye	Execution Date			e, Transaction D		Disposed 5)	isposed Of (D) (Instr. 3, 4			Securitie Beneficia	s Form	n: Direct   c	of Indirect Beneficial		
(Montin/D							(Month/Day/Yea									ned Following		l) (Instr. 4)	Ownership	
									Code	v	Amount	unt (A) or F		Price	Transact				(Instr. 4)	
									_			``	_		+			_		
Common Stock 12/04/					+/2024		Α		37,800 <sup>(1)</sup> A		\$0	96,200(2)			D					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
			(6	e.g., p	uts,	call	s, warr	ants	, option	ıs, c	onvertil	ble sec	urit	ties)						
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		ate, T	4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				c	ode	v	(A)	(D)	Date Exercisab		Expiration Date	Title	or Ni of	umber						
Stock option (right to buy)	\$29.44	12/04/2024			A		60,300		(3)	1	12/03/2034	Commor Stock	6	0,300	<b>\$0</b>	60,300	)	D		

## **Explanation of Responses:**

- 1. Consists of shares of Common Stock issuable under 37,800 restricted stock units ("RSUs"). Each RSU represents the right to receive one share of Common Stock upon vesting. These RSUs are scheduled to vest in equal quarterly installments over four years with the first installment vesting on March 4, 2025
- 2. Includes 96,200 unvested RSUs.
- 3. This option was granted on December 4, 2024. The shares underlying the option are scheduled to vest over four years in equal monthly installments through December 4, 2028.

/s/ Richard Scalzo, Attorney-in-

12/06/2024

**Fact** 

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

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.