FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
-------------	------------

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

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

See footnote(1)(4)

See footnote(3)(4)

> 11. Nature of Indirect Beneficial Ownership (Instr. 4)

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

							(	.,												
					2. Issuer Name <b>and</b> Ticker or Trading Symbol Solid Biosciences Inc. [ SLDB ]									S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner						
(Last) 200 BER	(Fii	rst) (f	Midd	,		Date of E /01/202		iest Tra	ansactio	on (Mo	onth	n/Day/Year)			Office below	er (give t v)	itle		her (specify low)	
					4. 1	f Ameno	dme	nt, Dat	e of Or	iginal	File	ed (Month/Day	y/Year)	) 6. Lir		r Joint/G	roup Fili	ng (Che	eck Applicable	
(Street) BOSTO	N M.	A 0	211	6											Form				Person Reporting	
(City)	(St	ate) (2	Zip)												1 013	J11				
		Table	1 - 1	Non-Deriva	ative	Secu	ıriti	ies A	cquir	ed, [	Dis	posed of,	, or E	Benefici	ally Own	ed				
Date			2. Transaction Date (Month/Day/Y		Execution if any	Deemed cution Date, y nth/Day/Year)		3. Transaction Code (Instr. 8)		4. Di 5)	isposed Of (D	cquired (A) or )) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owner Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Ai	mount	(A) or (D)	Price	Transaction	Reported Transaction(s) (Instr. 3 and 4)		<del>1</del> )	(Instr. 4)	
Common	Stock			04/01/2021					J <sup>(1)</sup>		7	787,586	A	\$5.53(1)	787,586		]	I Se fo		
Common	Stock			04/01/202	21				J <sup>(2)</sup>		(	663,720	A	\$5.53 <sup>(2)</sup>	11,580	),287	]	[	See footnote <sup>(3)(</sup>	
		Tal	ble	II - Derivat (e.g., pu								osed of, o				d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if a	3A. Deemed Execution Date, if any (Month/Day/Year)		saction e (Instr.	5. Numbor of Derivativ Securitie Acquirec (A) or Disposed of (D) (Instr. 3, and 5)		Expiration (Month/Das		n Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Num derivati Securit Benefic Owned Followi Reporte Transac (Instr. 4	ive ies cially ing ed ction(s)	10. Owner Form: Direct or Indi (I) (Ins	(D) Owners rect (Instr. 4	
					Cod	e V	(A	A) (D	Dai	te ercisat	ble	Expiration Date	Title	Amount or Number of Shares						
1. Name and Address of Reporting Person*  RA CAPITAL MANAGEMENT, L.P.																				
(Last) (First) (Middle) 200 BERKELEY STREET, 18TH FLOOR																				
(Street)	N	MA		02116		_														
(City)		(State)		(Zip)																
		Reporting Person* thcare Fund																		
(Last) (First) (Middle)				_																
	RKELEY ST	ΓREET, 18TH F	LO	OR																
(Street)	N	MA		02116																
(City)	_	(State)		(Zip)																
ı	nd Address of nsky Pete	Reporting Person*	_																	

(Middle)

(Last)

(First) C/O RA CAPITAL MANAGEMENT, L.P.

200 BERKELI	EY STREET, 18T	H FLOOR								
(Street)										
BOSTON	MA	02116								
(City)	(State)	(Zip)								
Name and Address of Reporting Person*										
Shah Rajeev	<u> M.</u>									
(Last)	(First)	(Middle)								
, ,	TAL MANAGEM	,								
200 BERKELEY STREET, 18TH FLOOR										
(Street)										
BOSTON	MA	02116								
(0)	(2)	( <del>7</del> : )	_							
(City)	(State)	(Zip)								

## **Explanation of Responses:**

- 1. On April 1, 2021, RA Capital Healthcare Fund, L.P. (the "Fund") acquired a participation interest in the reported shares as part of a reorganization of the assets of a separately managed account (the "Reorganization"). The Fund disclaims beneficial ownership of the reported shares, except to the extent of its pecuniary interest therein.
- 2. Acquired pursuant to the Reorganization.
- 3. Held directly by the Fund.
- 4. RA Capital Management, L.P. (the "Adviser") is the investment manager for the Fund. The general partner of the Adviser is RA Capital Management GP, LLC (the "Adviser GP"), of which Dr. Peter Kolchinsky and Mr. Rajeev Shah are the managing members. The Adviser, the Adviser GP, Dr. Kolchinsky and Mr. Shah disclaim beneficial ownership of any of the reported securities, except to the extent of their pecuniary interest therein.

/s/ Peter Kolchinsky, Manager 04/05/2021 of RA Capital Management, L.P. /s/ Peter Kolchinsky, Manager of RA Capital Healthcare GP, LLC, the General Partner of 04/05/2021 RA Capital Healthcare Fund, L.P. /s/ Peter Kolchinsky, 04/05/2021 <u>individually</u> /s/ Rajeev Shah, individually 04/05/2021 \*\* 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.