SEC For	m 4 FORM	4		) ST/	ATES	s se	CUR	ITIE	ES AND	) E	ХСНА	NGE C	OMMI	SSION						
				5.1		TES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										OMB APPROVAL				
C Section	this box if no lo n 16. Form 4 or	ΞΝΤ	IT OF CHANGES IN BENEFICIAL OWNERSHIP									OMB Number: 3235-0287 Estimated average burden								
	ions may conti tion 1(b).	nue. See		pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940										hours per response: 0.5						
1. Name and Address of Reporting Person <sup>*</sup> Brooks Gabriel						Issuer	Name <b>ar</b>	nd Tic	cker or Tradi es Inc. [	ing S	Symbol		Relationship eck all appli Directo	cable) or	g Pers	10% Ov	/ner			
(Last) (First) (Middle) C/O SOLID BIOSCIENCES						3. Date of Earliest Transaction (Month/Day/Year) X 10/18/2023									X Officer (give title Other (specify below) below) Chief Medical Officer					
500 RUTHERFORD AVENUE														6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) CHARLESTOWN MA 02129															orm filed by One Reporting Person form filed by More than One Reporting verson					
(City) (State) (Zip)					<sup>-</sup> R	Rule 10b5-1(c) Transaction Indication														
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tab	ole I - Nor	n-Deri	vativ	e Se	curities	s Ac	quired, I	Disp	posed o	f, or Be	neficial	ly Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ear) i	2A. Deemed Execution Date, if any (Month/Day/Yea		, Transaction Dispose Code (Instr. 5)		Disposed	ities Acquired (A) or d Of (D) (Instr. 3, 4 a		Securitie Beneficia	I Securities Form Beneficially (D) of		r Indirect	7. Nature of Indirect Beneficial Ownership		
									V Amount		(A) o (D)	(A) or (D) Price					(Instr. 4)			
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)	ative Conversion Date rity or Exercise (Month/Day/Year)		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount 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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares							
Employee Stock Option (Right to Buy)	\$2.15	10/18/2023			А		78,000		(1)	1	.0/18/2033	Common Stock	78,000	\$0.00	78,00	0	D			
Restricted Stock Units	(2)	10/18/2023			Α		39,000		(3)		(3)	Common Stock	39,000	\$0.00	39,00	0	D			

## Explanation of Responses:

1. This option was granted on October 18, 2023 ("Grant Date") and vests over four years, with 25% of the original number of shares vesting on the first anniversary of the Grant Date and 2.0833% of the original number of shares monthly thereafter until the fourth such anniversary.

2. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock (the "RSUs").

3. The RSUs were granted on the Grant Date and vests over four years, with 25% of the original number of shares vesting on each anniversary of the Grant Date until the fourth such anniversary.

<u>/s/ David Tyronne Howton as</u> <u>attorney-in-fact for Gabriel</u>

Brooks

10/20/2023

\*\* Signature of Reporting Person Date

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

\* 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.