SEC For	m 4 FORM	4 L	JNITED) STA	TES	SE	CUR	2 ITI	ES AND	E>	КСНА	NGE	СС	омм	ISSION	I				
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See					ΝΤ Ο	F			ington, D.C. 2		SHIP	Estimated average burden			3235-0287 en					
	tion 1(b).	nue. See		File					a) of the Sec Investment				of 193	4		hours	per re	esponse:	0.5	
1. Name and Address of Reporting Person* White William Richard						2. Issuer Name and Ticker or Trading Symbol Disc Medicine, Inc. [IRON]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 06/09/2023									Officer (give title Other (specify below) below)					
C/O DISC MEDICINE, INC. 321 ARSENAL STREET, SUITE 101					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) WATER	(Street) WATERTOWN MA 02472														Form filed by More than One Reporting Person					
(City) (State) (Zip)						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.														
		Tabl	e I - Nor	n-Deriva	ative \$	Sec	uritie	s Ac	quired, D	isp	osed	of, or E	Bene	ficia	lly Owne	d				
1. Title of Security (Instr. 3) Date (Month/Date)					E) if ;	2A. Deemed Execution Date, f any (Month/Day/Yea		Code (Ins	ion Dispose		rities Acquired (A ed Of (D) (Instr. 3,			d Securiti Benefic Owned	Securities For Beneficially (D)		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code V		Amount (A) or (D)			Price			Transac		(Instr. 4)	
		Ta							uired, Dis s, options						/ Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date, Transa Code (I			5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr. and 5)	tive ties red sed	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 derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Exp Dat	piration te	Title	or Nu of	nount Imber Iares						
Stock Option (Right to Buy)	\$45.69	06/09/2023			A		7,136		(1)	06/	08/2033	Commo Stock	n 7,	,136	\$0.00	7,136		D		

Explanation of Responses:

1. The shares underlying this option vest upon the first to occur of (i) the date of the Company's 2024 annual meeting of its stockholders, or (ii) the one-year anniversary of the grant date, subject to the Reporting Person's continued service on such vesting date.

Remarks:



06/09/2023

** 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.