| SEC For | m 4 FORM | Л | |) ST/ | ATF | ss | FCURI | TIE | S ANI | DF | ХСНАМ | IGF | = CO | MMIS | SSION | | | | | |
|------------------------------------------------------------------------|---------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------------------|--------|-------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------|--------|------------------------------------------------------------------|---------------------------------------------------------------------------------------|-------|---------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|-------------------------------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------|--|
| | | | | | | TES SECURITIES AND EXCHANGE COMMISS Washington, D.C. 20549 | | | | | | | | | | OMB APPROVAL | | | | |
| Section obligat | this box if no le n 16. Form 4 o ions may conti tion 1(b). | STATEMENT OF CHANGES IN BENEFICIAL OWNER Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | | | IIP OMB Number: 3235-0 Estimated average burden hours per response: | | | 3235-0287 1 0.5 | | | |
| 1. Name and Address of Reporting Person [*] KEATING LAURIE | | | | | A | 2. Issuer Name and Ticker or Trading Symbol <u>ALNYLAM PHARMACEUTICALS, INC.</u> [ALNY] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) | | | | | |
| (Last) 675 WES HENRI | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/24/2021 | | | | | | | | | , | P, Chief | Legal | , | | | | |
| (Street) CAMBRIDGE MA | | | 02142 | | | 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 Form filed by More than One Reporting | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | Person | | | | | | |
| | | Та | ble I - Nor | 1-Deri | ivativ | /e Se | ecurities | Acq | juired, | Dis | posed of | , or | Bene | ficially | / Owned | | | | | |
| | | | | 2. Tran Date (Month | | . | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Code | v | Amount | | A) or D) | Price | Transactio (Instr. 3 a | | | | (Instr. 4) | | |
| | | | Table II - I | | | | | | | | osed of, onvertib | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | erivative Conversion Date Execut ecurity or Exercise (Month/Day/Year) if any | | | n Date, Trar | | iction Instr. | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4) | | s Security | 8. Price of Derivative Security (Instr. 5) | 9. Numbo derivativ Securitie Beneficia Owned Followin Reported | re es ally g | Ownershij Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | | Amount or Number of Shares | | Transact (Instr. 4) | ion(s) | | | |

Explanation of Responses:

\$151.59

Stock Option (right to buy)

1. Represents the time-vested stock option portion of the reporting person's Annual Equity Award for 2020. The reporting person also received 9,566 performance stock units that will vest upon the achievement of four specific performance conditions, which will be reported on a Form 4 if and when each performance condition is met and the performance stock units vest.

(2)

2. The stock option vests as to 25% of the shares on the 1st anniversary of the date of the stock option grant and as to an additional 6.25% of the shares each successive three month period thereafter.

17,846⁽¹⁾

By: /s/ Mary Beth DeLena,

Common Stock

02/23/2031

| Attorney-in-Fact For: Laurie | 02/26/2021 |
|------------------------------|------------|
| <u>Keating</u> | |

** Signature of Reporting Person Date

17,846

\$<mark>0.0</mark>

17,846

D

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).

02/24/2021

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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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.