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

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

1. Name and Address of Reporting Person* Greenstreet Yvonne (Last) (First) (Middle)						Issuer Name and Ticker or Trading Symbol ALNYLAM PHARMACEUTICALS, INC. [ALNY] Date of Earliest Transaction (Month/Day/Year)								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) below) President & COO					Owner (specify	
675 WEST KENDALL STREET HENRI A. TERMEER SQUARE						04/19/2021								Fresident & COO						
(Street) CAMBRIDGE MA 02142					4. If a	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(St	ate) (Zip)												Perso		iore une	ar one re	porting	
		Table	2 I - No	on-Deriva	tive	Secu	rities	Acc	quire	d, Dis	sposed of	, or B	enefic	ciall	y Own	ed				
				2. Transacti Date (Month/Day	h/Day/Year) Exe		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 and 5)				Beneficially Owned Following		Form	: Direct Indirect	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)			
Common Stock				04/19/2021					A ⁽¹⁾		5,083	A	\$0.	.0	13,	,374		D		
Common Stock				04/20/20	04/20/2021				F ⁽²⁾		2,266	D	\$131	.75	11,	11,108		D		
Common Stock			04/20/20	04/20/2021				F ⁽²⁾		85	D	\$134	4.49 1		11,023		D			
Common Stock														407			I	by Managed Account ⁽³⁾		
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	Co 8)		action (Instr.			Expira (Mont	te Exer ation D th/Day/	Year) Expiration	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		De Se (Ir	8. Price of Derivative Security (Instr. 5) Bene Own Follo Repc Trans (Instr		e s ally	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	

Explanation of Responses:

- 1. On February 26, 2020, the reporting person was granted performance-based restricted stock units (PSU) in connection with the 2019 year-end compensation review. One third of the PSU award vests upon the achievement of each of three specific clinical development, regulatory or commercial events. The People, Culture and Compensation Committee of the Board determined that the first performance criterion was met and one-third of the PSU award vested as of April 19, 2021.
- 2. Represents shares automatically sold by the Company on behalf of the reporting person pursuant to a mandatory sell-to-cover provision in the PSU award agreement required to cover minimum statutory tax withholding obligations that became due upon the vesting event.
- 3. Reflects shares of ALNY common stock acquired by the reporting person under the ALNY 401(k) plan as a result of the ALNY 401(k) matching contribution program.

By: /s/ Mary Beth DeLena

Attorney-in-Fact For: Yvonne 04/21/2021

Greenstreet

** 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.