FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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OMB APPROVAL

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OMB Number:	3235-0287									
Estimated average burden										
hours per response	. 0.5									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	ee Instruction																				
1. Name ar	2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)											
Garg P	ALNYLAM PHARMACEUTICALS, INC. [ALNY]							[Director 10% Owner												
(Look) (First) (Middle)															Office	r (give title ')	Э	Other below	(specify)		
(Last) (First) (Middle) 675 WEST KENDALL STREET						3. Date of Earliest Transaction (Month/Day/Year)								CMO & EVP Dev & Med Affairs							
HENRI A. TERMEER SQUARE						10/08/2024															
					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) CAMBR	IDGE M	A 0)2142											V		•		oorting Per an One Re			
(City) (State) (Zip)															Perso				·		
		Table	I - No	n-Deriva	tive S	Secu	rities	Acc	uired	, Dis	posed of	, or E	Benefic	ially	Own	ed					
1. Title of Security (Instr. 3) 2. Transc Date (Month/L					Execution Date,		ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			and Securities Beneficially Owned Followin		s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) o (D)	r Price	Tr	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Common	Stock			10/08/2	024)24			A ⁽¹⁾		96	A	\$0	.0	15,705			D			
Common Stock															43	31		I	by Managed Account ⁽²⁾		
Common Stock												\vdash			2:	50		I	by Trust ⁽³⁾		
		Та	ble II -								osed of, convertib				wned	t					
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security						action (Instr.			6. Date Expirat (Month	tion D		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s lly	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)		
			Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares										

Explanation of Responses:

- 1. On February 23, 2016, the People, Culture, and Compensation Committee of the issuer approved the issuance of shares of Company common stock having an aggregate value of USD \$50,000 to each employee who completes 10 consecutive years of employment. The shares issued and reported here on Form 4, net of the minimum statutory tax liability, were issued to the reporting person in recognition of 10 years of continuous employment on October 8, 2024.
- 2. Reflects shares of ALNY common stock acquired by the Reporting Person under the issuer 401(k) plan as a result of the issuer 401(k) matching contribution program.
- 3. Represents shares held in trust, of which the Reporting Persons spouse is co-trustee. The Reporting Person disclaims beneficial ownership of these shares, and the filing of this report is not an admission that the Reporting Person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.

By: Brett Budzinski,

Attorney-in-Fact For: Pushkal 10/10/2024

Garg

** 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.