FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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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

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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* MARAGANORE JOHN (Last) (First) (Middle) 675 WEST KENDALL STREET HENRI A. TERMEER SQUARE					Issuer Name and Ticker or Trading Symbol ALNYLAM PHARMACEUTICALS, INC. [ALNY] One of Earliest Transaction (Month/Day/Year) 04/07/2020								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner X Officer (give title Other (specify below) Chief Executive Officer					
(Street) CAMBRIDGE (City)	(State)	(Zip)	on Doriva		4. If Amendment, Date of Original Filed (Month/Day/Year) tive Securities Acquired, Disposed of, or Benefi									Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a 5)			r	5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	:	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock			04/07/20	04/07/2020				A ⁽¹⁾		14,167	A	\$0	0.0	204	4,160		D		
Common Stock		04/07/2020				F ⁽²⁾		6,315	D	\$10	4.75	197	7,845		D				
Common Stock		04/07/2020					F ⁽²⁾		256	D	\$10	6.27	197	7,589		D			
Common Stock													3,133				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. Convers or Exert Price of Derivati Security	cise (Month/Day/Year) ve	Execu if any	y Cc hth/Day/Year) 8)		saction le (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration I (Month/Day		Expiration	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amount or Number of Title Shares		D.S. (III	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)		

Explanation of Responses:

- 1. On February 28, 2019, the reporting person was granted performance-based restricted stock units (PSU) in connection with the 2018 year-end compensation review. This PSU award vests in three equal installments upon the later of one year from the date of grant and the achievement of each of three specific clinical development, regulatory or commercial events. One third of the shares subject to release under the PSU award vested upon the filing by the Company of its fourth NDA with the FDA, as determined by the compensation committee of the Company effective April 7, 2020.
- 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: John M. 04/09/2020 <u>Maraganore</u>

** 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.