FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
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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)

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* Lee Jennifer Kayden					<u>RI</u>	2. Issuer Name and Ticker or Trading Symbol RHYTHM PHARMACEUTICALS, INC. RYTM]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last)	,	irst)	(Middle) ALS, INC.			Date of Earliest Transaction (Month/Day/Year) 2/16/2024							below	Officer (give title below) EVP, Head of	Nort	below)			
222 BERKELEY STREET, 12TH FLOOR					4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	N M	ΙA	02116												filed by Mor		orting Persor n One Repor		
(City)	(S	tate)	(Zip)		Rı	ule	10b5-	1(c)	Trans	acti	ion Ind	ication							
									icate that a to defense co						on or written	plan th	at is intended	to	
		Tab	le I - Non	-Deriv	/ative	e Se	curities	s Ac	quired,	Dis	posed c	f, or Be	neficia	ly Owne	k				
1. Title of Security (Instr. 3) 2. Trans Date (Month/I				action 2A. Dee Executi if any (Month/			Code (Instr. 5)			Benefic Owned	es Formally (D) (I) (I		rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount	it (A) or (D)		Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 02/16				5/2024		A		33,750	3,750 ⁽¹⁾ A		40,602			D					
		•	Table II - I)						uired, D s, option					Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution E if any (Month/Day	Date, T	4. Transaction Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Yea		•	7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	s Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares						
Restricted Stock Units	(2)	02/16/2024			A		22,000		(3)		(3)	Common Stock	22,000	\$0	22,000	0	D		
Stock Option (Right to	\$49.23	02/16/2024			A		67,000		(4)	0	02/15/2034	Common Stock	67,000	\$0	67,000	0	D		

Explanation of Responses:

- 1. The Issuer previously granted the Reporting Person an award of restricted stock units that vest based on the Issuer's satisfaction of certain performance objectives. On February 16, 2024, the Board determined that the performance condition had been satisfied.
- 2. Each restricted stock unit represents a contingent right to receive one share of Issuer common stock.
- 3. The restricted stock units vest as to 25% of the total shares on each of February 16, 2025, February 16, 2026, February 16, 2027 and February 16, 2028. The restricted stock units have no expiration date.
- 4. The stock options were granted on February 16, 2024. The options vest and become exercisable in 16 substantially equal installments upon the Reporting Person's completion of each three full months of successive service to the Issuer following the grant date.

/s/ Hunter Smith, Attorney-in-Fact for Jennifer Kayden Lee

02/21/2024

** 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.