FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
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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* GOOD JENNIFER L (Last) (First) (Middle) 222 BERKELEY STREET, 12TH FLOOR (Street) BOSTON MA 02116 (City) (State) (Zip)					3. I 06. 4. I	2. Issuer Name and Ticker or Trading Symbol RHYTHM PHARMACEUTICALS, INC. [RYTM] 3. Date of Earliest Transaction (Month/Day/Year) 06/18/2024 4. If Amendment, Date of Original Filed (Month/Day/Year)								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify below) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											l to								
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				saction	2A. Deemed Execution Date,		3. Transacti Code (Ins 8)	on 5	4. Securities Acquired (A Disposed Of (D) (Instr. 3, r. 5)			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
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)	3A. Deemed Execution I if any (Month/Day	ate, Tra	Transa Code (l		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		e and	7. Title and of Securiti Underlying Derivative (Instr. 3 and	ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Expi Date	iration e	Title	Amount or Number of Shares						
Stock Option (right to buy)	\$41.39	06/18/2024			A		14,000		(1)	06/1	17/2034	Common Stock	14,000	\$0	14,000	0	D		
Restricted Stock Units	(2)	06/18/2024			A		4,000		(3)		(3)	Common Stock	4,000	\$0	4,000		D		

Explanation of Responses:

- 1. The options fully vest upon the earlier of (i) June 18, 2025 or (ii) the date of the Issuer's annual meeting of the stockholders to be held in 2025, subject to the Reporting Person's continued service on such
- 2. Each restricted stock unit represents a contingent right to receive one share of Issuer common stock.
- 3. The restricted stock units fully vest upon the earlier of (i) June 18, 2025 or (ii) the date of the Issuer's annual meeting of the stockholders to be held in 2025, subject to the Reporting Person's continued service on such vesting date. The restricted stock units have no expiration date.

/s/ Hunter Smith, attorney-infact for Jennifer L. Good

06/20/2024

** 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.