

## ALNYLAM PHARMACEUTICALS, INC.

# Reported by STARR KEVIN P

#### FORM 4

(Statement of Changes in Beneficial Ownership)

### Filed 06/06/17 for the Period Ending 06/02/17

Address 300 THIRD STREET

CAMBRIDGE, MA 02142

Telephone (617) 551-8200

CIK 0001178670

Symbol ALNY

SIC Code 2834 - Pharmaceutical Preparations

Industry Biotechnology & Medical Research

Sector Healthcare

Fiscal Year 12/31





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

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *      |   |                 |  | 2.                     | 2. Issuer Name <b>and</b> Ticker or Trading Symbol                   |  |                                |           |   |           |                   |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)           |  |   |                                     |   |  |            |
|--|---|-----------------|--|------------------------|--|--|--------------------------------|-----------|---|-----------|-------------------|--|---|--|---|-------------------------------------|---|--|------------|
| ~ I I I I I I I I I I I I I I I I I I I        |   |                 |  |                        | ALNYLAM PHARMACEUTICALS,<br>INC. [ ALNY ]                            |  |                                |           |   |           |                   |  | X _ Director  | ,,   | 1   | 10% Owner                           |   |  |            |
| (Last  | t) (Firs  | First) (Middle) |  |                        |  | 3. Date of Earliest Transaction (MM/DD/YYYY) |                                |           |   |           |                   |  |   | Officer (gi  | ve title belov                                      | v)O                                 | ther (specify   | below)   |            |
| 300 THIRD                                      | STREE   | Γ               |  |                        |  |  |                                | 6/2       | 2/201                                   | 7         |                   |  |   |  |   |                                     |   |  |            |
| (Street)                                       |   |                 |  |                        | 4. If Amendment, Date Original Filed (MM/DD/YYYY)                    |  |                                |           |   |           |                   | 7) 6   | 6. Individual or Joint/Group Filing (Check Applicable Line)                       |  |   |                                     |   |  |            |
| CAMBRIDGE, MA 02142 (City) (State) (Zip)       |   |                 |  |                        |  |  |                                |           |   |           |                   | -  | X Form filed by One Reporting Person Form filed by More than One Reporting Person |  |   |                                     |   |  |            |
|  |   |                 | Table I                                | - Non-De               | rivat  | tive Secu                                    | urities                        | Ac        | quire                                   | d, D      | isposed           | d of   | , or B  | enef   | icially Own   | ed                                  |   |  |            |
| 1. Title of Security (Instr. 3) 2. Trans. D    |   |                 | Trans. Date                            | Exec                   | Deemed<br>cution<br>, if any   | 3. Trans. Co<br>(Instr. 8)                   |                                | or Dispos |   | sposed of | posed of (D)      |  | Follo   | Amount of Securities Beneficollowing Reported Transactionstr. 3 and 4) |   |                                     | Form:   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership                |            |
|  |   |                 |  |                        |  |  |                                | le        | v .                                     | Amou      | unt (A)           | ) or<br>O)   | Price   |  |   |                                     |   |  | (Instr. 4) |
|  | Tak   | ole II - Dei    | rivative S                             | ecurities              | Bene   | eficially                                    | Owne                           | ed (      | e.g. ,                                  | puts      | s, calls,         | wa   | rrants  | s, op  | tions, conve  | ertible sec                         | curities)   |  |            |
| 1. Title of Derivate<br>Security<br>(Instr. 3) | Conversion<br>or Exercise<br>Price of<br>Derivative | Date            | 3A. Deeme<br>Execution<br>Date, if any | d 4. Trans. (Instr. 8) | Code 5. Number<br>Derivative<br>Acquired (Disposed o<br>(Instr. 3, 4 |  | Securities<br>(A) or<br>of (D) |           | Date Exercisable and<br>Expiration Date |           | Se                | 7. Title and A Securities Un Derivative Se (Instr. 3 and 4 |   | erlying  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | Securities<br>Beneficially<br>Owned | Form of Derivative Security:                          | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |            |
|  | Security  |                 |  | Code                   | V  | (A)  | (E                             |           | Date<br>Exercisa                        | able      | Expiratio<br>Date | n<br>Ti  | itle  | N  | amount or<br>Jumber of<br>Jumes                     |                                     | Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | Direct (D)<br>or Indirect<br>(I) (Instr.<br>4)                     |            |
| Stock Option<br>(right to buy)                 | \$71.99   | 6/2/2017        |  | A                      |  | 11250  |                                |           | 6/2/201                                 | 18        | 6/1/2027          | . (  | Commo<br>Stock  | on   | 11250   | \$0.0                               | 11250   | D  |            |
| Explanation o                                  | f Response  | s:              |  |                        |  |  |                                |           |   |           |                   |  |   |  |   |                                     |   |  |            |

#### **Reporting Owners**

| Reporting Owner Name / Address | Relationships |           |         |       |  |  |  |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director      | 10% Owner | Officer | Other |  |  |  |
| STARR KEVIN P                  |               |           |         |       |  |  |  |
| 300 THIRD STREET               | X             |           |         |       |  |  |  |
| CAMBRIDGE, MA 02142            |               |           |         |       |  |  |  |

#### Signatures

| By: /s/ Michael P. Mason, Attorney-in-Fact For: Kevin P. Starr | 6/6/2017 |
|--|----------|
| **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 control number.