Edgar Filing: ALNYLAM PHARMACEUTICALS, INC. - Form 4

| ALNYLAM F Form 4 July 13, 2005 | PHARMACEUT | ICALS, IN | IC. | | | | | | | | |
|---|---|--|---|--|---|---------------|------------------|---|---|----------|--|
| FORM | Л | | | | | | | | OMB AF | PROVAL | |
| | Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | |
| Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contir <i>See</i> Instruct 1(b). | Filed purs Section 17(a | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section | | | | | | | January 31 2005 Estimated average burden hours per response 0.5 | | |
| (Print or Type Re | esponses) | | | | | | | | | | |
| VINCENT JAMES L Symb ALN PHA | | | 2. Issuer Name and Ticker or Trading ymbol LNYLAM HARMACEUTICALS, INC. ALNY] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner | | | |
| (Last)(First)(Middle)3. Date of (Month/I)C/O ALNYLAM07/12/2PHARMACEUTICALS, INC., 300 | | | | | ansaction | | | Officer (give below) | itle Other (specify below) | | |
| | | | | ndment, Date Original hth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) | (State) (2 | Zip) | Table | I - Non-D | erivative S | ecurit | ties Acq | uired, Disposed of | , or Beneficial | lv Owned | |
| | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution I any (Month/Day | d Date, if | 3. | 4. Securit on(A) or Dis (Instr. 3, 4) | ies Acosposed | quired of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | - | |
| Common Stock | 07/12/2005 | | | A | 10,000 | A | \$ 7.02 | 10,000 | D | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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 Date, if any (Month/Day/Year) | 4. 5. Number of Transactio-Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8 I S ((|
|---|---|---|---|--|---------|-------------------------------------|--------------------|---|-------------------------------------|-------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Stock Option (right to buy) | \$ 7.02 | 07/12/2005 | | А | 75,000 | (1) | 07/11/2015 | Common Stock | 75,000 | |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | |
|---|---------|---------------|-----------|---------|-------|--|--|
| · · · · · · · · · · · · · · · · · · · | | Director | 10% Owner | Officer | Other | | |
| VINCENT JAMES L C/O ALNYLAM PHARMACEUTICALS 300 THIRD STREET CAMBRIDGE, MA 02142 | , INC. | Х | | | | | |
| Signatures | | | | | | | |
| /s/ Patricia L. Allen, Attorney-In-Fact | 07/13/2 | .005 | | | | | |
| **Signature of Reporting Person | Date | | | | | | |
| Explanation of Poonon | 2001 | | | | | | |

Explanation of Responses:

* 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).

(1) The stock option vests as to one-third of the shares on each of the first, second and third anniversaries of the date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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