	m 4 FORM 4	4 U	NITE	D STAT	ES :	SEC					IGE (OMM	SSIO	N			
							Washing	gton, D.	C. 205	549					omb appro	DVAL	
to Sec	this box if no lo tion 16. Form 4	NT O	F Cł	IANGE	S IN	BEI	NEFICIA	L OV	VNER	SHIP	Estim	Number: ated average bure					
	ions may contir tion 1(b).	iue. See		Filed	pursua or Se	ant to S ection 3	ection 16(a) 0(h) of the li	of the S nvestme	Securif ent Co	ies Exchang mpany Act o	e Act of f 1940	1934		hours	per response:	0.5	
1. Name and Address of Reporting Person [*] Taub Rebecca					2. Issuer Name and Ticker or Trading Symbol <u>MADRIGAL PHARMACEUTICALS</u> , <u>INC.</u> [MDGL]							(Che	ck all app	licable) tor	ng Person(s) to 10% C Other	Owner	
(Last) (First) (Middle) C/O MADRIGAL PHARMACEUTICALS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 01/16/2024								X Officer (give title Other (specify below) below) Pres., R&D, and CMO				
200 BARR HARBOR DRIVE, SUITE 200					4. lf /	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. In Line								,			
(Street) WEST CONSHOHOCKEN PA 19428				3										filed by Mo	e Reporting Per re than One Re		
(City)	(Sta	,	Zip)			Check th satisfy th	is box to india le affirmative	cate that defense	a tran conditi	ons of Rule 10	ade pursu)b5-1(c). {	ant to a cor See Instruct	on 10.		en plan that is int	ended to	
		Table	e I - No	on-Deriva	tive S	Secur	ities Acq	uired	, Dis	posed of	, or Be	neficial	ly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,		tion Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (Disposed Of (D) (Instr. 3 5)			5, 4 and Securit Benefic Owned		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock 01/16/2								Code	v	Amount	(A) or (D)	Price			() ((Instr. 4)	
Common Stock				01/16/2	024			Code F ⁽¹⁾	v	Amount 1,546	(A) or (D)	Price \$243.92	Transa (Instr. 3	ed ction(s)	D		
Common	Stock			01/16/2	024				v		(D)		Transa (Instr. 3 2 15	ed ction(s) 3 and 4)			
Common				01/16/2	024				v		(D)		Transa (Instr. 3) 2 15 43	ed ction(s) 3 and 4) ,001 ⁽²⁾	D		
		Ta	ble II -	- Derivati	ve Se			F ⁽¹⁾	Disp		(D) D	\$243.9	Transa (Instr. 3) 2 15 43 65	ed ction(s) 3 and 4) ,001 ⁽²⁾ 8,212 5,540	D	(Instr. 4) By SQN,	
		Tal 3. Transaction Date (Month/Day/Year)	3A. De Execu if any	- Derivati (e.g., pu remed tion Date,	ve Se	alls, v		F ⁽¹⁾	Disp ons, (1,546 osed of, o convertib	(D) D	\$243.9. \$243.9. eficially urities) und 8 es 5 ling (I (Instr. (Instr.)	Transa (Instr. 1) 2 15 43 65 Owned	ed ction(s) 3 and 4) ,001 ⁽²⁾ 8,212 5,540	D D I I of 10. Ownership Form: y Direct (D) or Indirect (I) (Instr. 4	By SQN, LLC ⁽³⁾ 11. Nature of Indirec Beneficia Ownershi (Instr. 4)	
Common 1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	3A. De Execu if any	- Derivati (e.g., pu remed tion Date,	ve Se its, ca ^{4.} Transa Code (alls, v	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4	F ⁽¹⁾ ired, optio	Disp ns, c	1,546 osed of, o convertib	(D) D D D D D D D D D D D D D D D D D D	\$243.9. \$243.9. eficially urities) und 8 es 5 ling (I (Instr. (Instr.)	Trainsa (Instr. 3 2 15 43 65 Owned Price of erivative ecurity	ed ction(s) 3 and 4) ,001 ⁽²⁾ 8,212 5,540 9. Number derivative Securities Beneficiall Owned Following Reported Transactio	D D I I of 10. Ownership Form: y Direct (D) or Indirect (I) (Instr. 4	By SQN, LLC ⁽³⁾	

1. Represents withholding of shares as payment of the Reporting Person's tax liabilities incident to the vesting of restricted stock units granted to the Reporting Person on January 16, 2023.

2. Represents restricted stock units granted to the Reporting Person on January 16, 2023.

3. The Reporting Person and her spouse are each managing members of SQN, LLC. The Reporting Person disclaims beneficial ownership of these securities except to the extent of her pecuniary interest therein, if any, and the inclusion of these shares in this report shall not be deemed an admission of the beneficial ownership of all of the reported shares for purposes of Section 16 or for any other purpose.

Remarks:

**As attorney-in-fact for Reporting Person

/s/ Brian J. Lynch**

01/18/2024

** 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.