SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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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 [*] Waltermire Robert E.	2. Date of E Requiring S (Month/Day 08/02/202	itatement /Year)	3. Issuer Name and Ticker or Trading Symbol <u>MADRIGAL PHARMACEUTICALS, INC.</u> [MDGL]						
(Last) (First) (Middle) FOUR TOWER BRIDGE 200 BARR HARBOR DRIVE, SUITE			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				5. If Amendment, Date of Original Filed (Month/Day/Year)		
200 DATA INTROCE DATA 2, SOTTE 200		XOfficer (give title below)Other (specify below)Senior VP, Chief Pharma Dev.					6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
WEST CONSHOHOCKEN PA 19428									by More than One Person
(City) (State) (Zip)									
Table I - Non-Derivative Securities Beneficially Owned									
1. Title of Security (Instr. 4)				unt of Securities cially Owned (Instr.			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
, , , , , , , , , , , , , , , , , , , ,	e of Derivative Security (Instr. 4) Expiration Date (Month/Day/Year)		Underlying Derivative Security (Instr. 4)			4. Conversi or Exerci Price of	ise Form:	Ownership	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount Der		Derivativ Security		ect	-,

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Brian J. Lynch, As
Attorney-in-fact for
Reporting Person

** Signature of Reporting Person

08/04/2021

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 5 (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.