SEC For	rm 4																		
	FORM	4) STA	ATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549											OMB APPROVAL				
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).							o Sectio	(a) of the Se Investment	curitie	es Exchai		SHIP	OMB Number: Estimated average hours per respon			3235-0287 n 0.5			
transac contrac the pur securiti intende defens	chase or sale of ies of the issue ed to satisfy the	pursuant to a written plan for of equity r that is																	
1. Name and Address of Reporting Person [*] <u>Kelley Shannon T</u>					M	2. Issuer Name and Ticker or Trading Symbol <u>MADRIGAL PHARMACEUTICALS</u> , <u>INC.</u> [MDGL]									eck all appli Directo	cable) or	ng Person(s) to Issuer 10% Owner		vner
(Last) (First) (Middle)						<u></u> [MDU	- 1				[Image: Officer (give title below)Other (specify below)				specify		
C/O MADRIGAL PHARMACEUTICALS, INC. 200 BARR HARBOR DRIVE, SUITE 200						Date of /05/20		t Trar	nsaction (Mo	nth/C)ay/Year)			Genera	l Cou	insel			
(Street) WEST CONSHOHOCKEN PA 19428						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				n
(City) (State) (Zip)																			
Table I - Non-Deriv. 1. Title of Security (Instr. 3) 2. Trans. Date (Month/L Month)				action	ction 2A. Dee Execution			e, 3. Transac Code (li	3. 4. 5 Transaction Dis Code (Instr. 5)		. Securities Acquired (A Disposed Of (D) (Instr. 3,		(A) or	5. Amou Securitie Benefici	nt of es	Form (D) o	n: Direct r Indirect	7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A (D) or)	Price Report Transa (Instr. 3		d tion(s)			(Instr. 4)
Common Stock				03/0	05/2025				A ⁽¹⁾		3,18	37 A		\$ <mark>0</mark>	10,477			D	
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. Deeme Execution if any (Month/Day	Date,	4. Transa Code 8)	action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exe Expiration (Month/Day	Date		Amoun Securit Underly Derivat	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	s Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	OI N OI	umber					
Stock Option (Right to Buy)	\$ 347.28	03/05/2025			Α		5,368		(2)	03	3/05/2035	Commo Stock		5,368	\$0	5,368		D	

Explanation of Responses:

1. Represents a grant of restricted stock units, which vest as to 25% of the shares on each of March 5, 2026, March 5, 2027, March 5, 2028 and March 5, 2029, provided the Reporting Person continues in service with the Issuer on each such date.

2. The option vests as to 25% of the shares on the first anniversary of the date of grant (March 5, 2026) and, thereafter, 6.25% of the shares shall vest on the last day of each successive three-month period, provided the Reporting Person continues in service with the Issuer on each such date.

Remarks:

/s/ Mardi Dier, as Attorney-in-Fact 03/07/2025

** 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.