FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPI	OMB APPROVAL									
	OMB Number:	3235-0287									
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- 1	hours per response:	0.5									

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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Name and Address of Reporting Person* <u>Mazzariello Gina</u>						2. Issuer Name and Ticker or Trading Symbol Amylyx Pharmaceuticals, Inc. [AMLX]									ck all applic Directo	cable) or	g Pers	son(s) to Iss	vner	
(Last)	,	(First) (Middle) LYX PHARMACEUTICALS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 02/26/2024							X	below)	(give title Chief Legal		Other (s below) Officer	specify	
43 THORNDIKE STREET					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) CAMBRIDGE MA 02141													X	X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)					R	Rule 10b5-1(c) Transaction Indication														
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tab	le I - Noi	n-Deriv	vativ	e Se	curities	s Ac	quired,	Dis	posed o	f, or Be	enefi	cially	Owned					
Dat			2. Trans Date (Month/	action 2A. Deemed Execution Date if any (Month/Day/Ye		Date,	Code (Instr. 5)		4 and Securiti Benefic Owned		es For ially (D) Following (I) (orm: Direct 0) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership						
									Code	v	Amount	(A) (D)	or P	rice	Reported Transact (Instr. 3	tion(s)			(Instr. 4)	
Common Stock				02/20	26/2024				A		36,667 ⁽¹⁾ A			\$0.00	82,912			D		
		-	Table II -								osed of, onvertil				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	rcise (Month/Day/Year) f ive	3A. Deemed Execution Dat if any (Month/Day/Ye	Date,	ate, Transa		of Derivati Securiti Acquire (A) or Dispose of (D) (II	of Derivative Securities Acquired		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal:		Expiration Date	Title	Amo or Nun of Sha	- 1						
Stock Option (right to buy)	\$17.56	02/26/2024			A		55,000		(2)	(02/25/2034	Commor Stock	55,	000	\$0.00	55,00	0	D		

Explanation of Responses:

- 1. The reported transaction involves the Reporting Person's receipt of a restricted stock unit ("RSU") award. The RSU shall vest in 4 equal annual installments, with the first installment vesting on the first day of the month of the one year anniversary of the date of grant, subject to the Reporting Person's continued service to the Issuer through such vesting date.
- 2. 1/4 of the shares subject to the option shall vest and become exercisable on the first day of the month of the one year anniversary of the date of grant, and the remaining shares shall vest monthly over the remaining 36 months, subject to the Reporting Person's continuous service to the Issuer through such vesting date.

/s/ Joshua B. Cohen, as Attorney in Fact

** Signature of Reporting Person Date

02/28/2024

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.