FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burden									
l	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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1. Name and Address of Reporting Person* <u>Levy Richard S</u>						2. Issuer Name and Ticker or Trading Symbol MADRIGAL PHARMACEUTICALS, INC.  [ MDGL ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last)				_						Officer below)	(give title		Other (sp below)	pecify						
(Last) (First) (Middle) C/O MADIGRAL PHARMACEUTICALS, INC. 200 BARR HARBOR DRIVE, SUITE 400						3. Date of Earliest Transaction (Month/Day/Year) 06/19/2018											ŕ			
(Street) WEST CONSHOHOCKEN PA 19428					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																	
		Tab	le I - Non	-Deriv	ative	e Se	curities	S Ac	quired, [	Disp	osed o	f, or Be	neficial	ly Owned	l					
Date							2A. Deemed Execution Date, if any (Month/Day/Yea		, Transaction D Code (Instr. 5			. Securities Acquired (A) Disposed Of (D) (Instr. 3, )		Benefici	es I ally Following (	6. Owner Form: Di (D) or Ind (I) (Instr.	rect of lirect E 4) C	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	t (A) or (D)		Transac (Instr. 3	tion(s)			nstr. 4)		
		7	Table II - I	Derivat (e.g., p	tive uts,	Secu calls	urities <i>i</i> s, warra	Acqı ants	uired, Di , options	spo s, co	sed of, onvertil	or Ben ble secu	eficially ırities)	Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Date, T	Transa Code (I		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	Ow For Dir or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				c	Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares							
Stock Option (Right to Buy)	\$303.79	06/19/2018			A		10,000		(1)	00	5/19/2028	Common Stock	10,000	\$0	10,000		D			

## **Explanation of Responses:**

1. The option vests as to 100% of underlying shares on the first anniversary of the grant date, provided that the Reporting Person continues to serve as a director of the Issuer until such anniversary date.

/s/ Michael Lawhead, as attorney-in-fact for Richard S. 06/21/2018 Levy

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.