FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

Check this box if no longer subject to SECtion 16, Form 4 or Form 5 obligations may continue. See Instruction 1(b).				FIEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940												OMB Number: 3235-0287 Estimated average burden hours per response: 0.5			
1. Name and Address of Reporting Person [*] Marshman Fund Trust II					2. Issuer Name and Ticker or Trading Symbol <u>Harmony Biosciences Holdings, Inc.</u> [HRMY]										all applicable Director	e)	Yerson(s) to Issuer X 10% Ow Other (s		· .
(Last) 330 N. V	`	First) VE, SUITE 300	(Middle) SUITE 300			3. Date of Earliest Transaction (Month/Day/Year) 08/21/2020									Officer (give title Other (specify below) below)				ecity
(Street) CHICAC	treet) HICAGO IL 60611				4. If Amendment, Date of Original Filed (Month/Day/Year) 09/01/2020								6. Indivi X	dividual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	. Davi	vative Securities Acquired, Disposed of, or Beneficially Owned														
			Table I - Nor			_		Acq		Disp		•							
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		Code (In			curities Acquired (A) o osed Of (D) (Instr. 3, 4 a			5. Amount of Securities Beneficially Owne Following Reporte		Form: (D) or	Direct I Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership
						Code			v	Amou	ınt	(A) or (D) Price		Transaction (Instr. 3 and			(Instr. 4)	
Common Stock 08/				08/2	21/2020				С		3,379,881		Α	(1) 3,379,		,881		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. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exp	6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (i and 4)		ying	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securiti Benefic Owned Followin Reporte Transac	ve es ially ng d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exe	e rcisable	Expir Date	ation	Title	Amou Numb	nt or er of Shares		(Instr. 4)			
Series A Preferred Stock	(1)	08/21/2020		с			25,000,000		(1)	(1) Common Stock		3,379	,881.68 ⁽²⁾	\$0.00	0		D	

Explanation of Responses:

1. Each share of prefered stock automatically converted on a 8.215-for-one basis into common stock upon the closing of the Issuer's initial public offering, with any fractional shares resulting from the conversion of the aggregate preferred stock held by the reporting person canceled in exchange for cash.

2. Includes 336,668.05 shares of common stock received upon the payment of an in-kind dividend on the Series A Preferred Stock on August 21, 2020.

Remarks:

Reflects the final dividend shares issuable on the preferred stock as communicated to the reporting person by the Issuer on August 31, 2020.

s/ Stephanie Wisdo, as Attorney-	
in-fact for Charles Harris,	09/04/2020
Authorized Signatory	
** 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.