## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington	D.C.	20549	

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b)

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

## STATEMENT 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

Name and Address of Reporting Person*     Dierks Jeffrey				Ha	2. Issuer Name and Ticker or Trading Symbol Harmony Biosciences Holdings, Inc. [ HRMY]									(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify below)					
(Last)	(Fi	irst)	(Middle)													— below)			below)	
C/O HARMONY BIOSCIENCES HOLDINGS, INC. 630 W GERMANTOWN PIKE, SUITE 215						3. Date of Earliest Transaction (Month/Day/Year) 09/30/2024									CHIEF	COMME	ERCIA	AL OFFIC	CER	
(Street) PLYMOUTH MEETING PA 19462				- 4. l	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)																	
		Tab	le I - Nor	n-Deriv	vativ	e Se	curit	ties Ac	quire	ed, D	isp	osed o	f, or B	ene	eficiall	y Owned	I			
1. Title of Security (Instr. 3)  2. Trans. Date (Month/I					action 2A. Deemed Execution Date, if any (Month/Day/Yea			Code (Instr. 5)						Beneficia	s ally following	Form (D) or	Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Co	ode V		Amount	(A) (D)	or	Price	Transact (Instr. 3 a	ion(s)			(Instr. 4)
Common Stock 09/30.				0/202	/2024			1	М		60,000		4	\$0	60,000			D		
Common Stock <sup>(1)</sup> 09/30				0/202	)/2024				F		23,643 D		\$40	36,357			D			
		7	Γable II - I									sed of,				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 Da if any (Month/Day/Y	Date, Transactio					Expir	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v			Date Exerc			xpiration ate	Title	0 N 0	lumber					
Restricted Stock Units	(2)	09/30/2024			M			60,000	(	(2)		(2)	Commo Stock	n 6	0,000	\$0	90,00	0	D	

## **Explanation of Responses:**

- 1. Shares withheld by the Issuer to satisfy required income tax withholdings pursuant to the vesting of restricted stock units on their scheduled vesting date.
- 2. The restricted stock units were granted on October 4, 2023. 40% of the restricted stock units shall vest on September 30, 2024 and 30% shall vest on each of September 30, 2025 and September 30, 2026. Each restricted stock unit represents a contingent right to receive one share of the Issuer's Common Stock and has no expiration date

/s/ Christian Ulrich, Attorney-

10/02/2024

in-Fact

\*\* 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.