FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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OMB APPRO	JVAL							
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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).

## 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

1. Name and Address of Reporting Person* <u>Kapadia Sandip</u>						2. Issuer Name and Ticker or Trading Symbol Harmony Biosciences Holdings, Inc. [ HRMY ]								$ \begin{array}{lll} \text{5. Relationship of Reporting Person(s) to Issuer} \\ \text{(Check all applicable)} \\ & \text{Director} \\ & \text{X} & \text{Officer (give title} \\ \end{array} \begin{array}{lll} \text{10\% Owner} \\ \text{Other (specify} \\ \end{array} $				
(Last)	(F	irst)	(Middle)			Date of Earliest Transaction (Month/Day/Year)								below)			below)	·
C/O HARMONY BIOSCIENCES HOLDINGS, INC.					10	10/04/2023								CITIEI	· PHYAIN	CIAL	OFFICE	
630 W GERMANTOWN PIKE, SUITE 215					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ir Line	dividual or Jo )	oint/Group	Filing	(Check App	licable
(7)					-									K Form fil	ed by One	Repo	rting Person	
	Street) PLYMOUTH PAGESTING PA 19462											Form filed by More than One Reporting Person				ing		
WIEETIIV	G				R	ule	10b5-1	1(c)	Transa	ctic	n Ind	ication						
(City)	(S	tate)	(Zip)			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.												satisfy
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transa Date (Month/D.					Execution D		Date	Code (Ins	Transaction Dispose Code (Instr.		ties Acqui I Of (D) (In	red (A) or str. 3, 4 and 5	5. Amoun Securities Beneficia Owned Fo Reported	s Forn ally (D) o ollowing (I) (Ir		: Direct   I Indirect   E str. 4)   (	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	<i>'</i>	Amount	(A) (D)	Price	Transaction(s) (Instr. 3 and 4)				msu. 4)	
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 Dat if any (Month/Day/Ye	Code (Ins					6. Date Exer Expiration D (Month/Day/		nd 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercisable		epiration ate	Title	Amount or Number of Shares		(Instr. 4)			
Restricted Stock Units	\$31.78	10/04/2023			A		150,000		(1)		(1)	Common Stock	150,000	\$0	150,00	00	D	

## **Explanation of Responses:**

1. 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, Attorneyin-Fact

\*\* Signature of Reporting Person Date

11/08/2023

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.