FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
vusilligion,	D.C.	20343	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours ner resnonse	. 05								

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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Levy Richard S</u>			2. Issuer Name and Ticker or Trading Symbol Kiniksa Pharmaceuticals, Ltd. [ KNSA ]									(Cr	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner						
(Last)	•	•	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/29/2023										er (give title		Other (sbelow)		
C/O KINIKSA PHARMACEUTICALS, LTD. CLARENDON HOUSE 2 CHURCH STREET			4. If Amendment, Date of Original Filed (Month/Day/Year)								Lin	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person							
(Street)	ΓON D	0 1	HM 11		Dul	D 1-4015 4(4) Taxasalisa I " "							Form filed by More than One Reporting Person						
(City) (State) (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.														
		Tabl	e I - Non	-Deriva	ative S	Sec	uriti	es Ac	quired, I	Disp	osed	of, or	Ben	eficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			Execution Date,		Code (Ir	Transaction Dispose Code (Instr. 5)		urities Acquired (A) sed Of (D) (Instr. 3, 4			Benefi	ies cially Following	Forn (D) o	6. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amoun	nt (A) or (D)		Price	Transa	ed ction(s) 3 and 4)			(Instr. 4)	
Class A Common Share 06/29/				/2023				М		5,00	00	A	(1)	(1) 5,000			D		
		Ta	able II - D						uired, Di , option						y Owned	I			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		ansaction ode (Instr.		n of E		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)		Date Exercisable		opiration	Title	O N O	umber					
Restricted Share	(1)	06/29/2023			M			5,000	(2)		(2)	Class .	on 5	5,000	\$0	0		D	

## Explanation of Responses:

- 1. Each Restricted Share Unit (RSU) represents a contingent right to receive one Class A Common Share of the Issuer.
- $2. The RSUs \ vested \ in \ a \ single \ installment \ on \ June \ 29, \ 2023; \ there \ was \ no \ expiration \ date \ for \ the \ RSUs.$

/s/ Madelyn Zeylikman, Attorney-in-Fact 07/03/2023

\*\* 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.