FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden 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 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person*							2. Issuer Name and Ticker or Trading Symbol Kiniksa Pharmaceuticals, Ltd. [KNSA]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Quart Barry D						Kiinksa i naimaceuticais, Liu. [KNSA]								✓ Director			10% Ov	ner		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 06/05/2024								Officer (give title Other (spe below) below)			pecify			
C/O KINIKSA PHARMACEUTICALS, LTD.					\vdash															
CLARENDON HOUSE 2 CHURCH STREET					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
CLARENDON HOUSE 2 CHURCH STREET															Form filed by One Reporting Person					
(Street)					_									Form filed by More than One Reporting Person						
HAMIL	HAMILTON D0 HM 1				R	Rule 10b5-1(c) Transaction Indication														
(City) (State) (Zip)					_ '`															
(Sign)											ction was ma ule 10b5-1(c)			et, instruction	or written pl	an that	is intended t	o satisfy		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transa						n	2A. Deem		3.		4. Securiti	es Acquire	d (A) or	5. Amount of				7. Nature of		
				Date (Month/Day/Year)			Execution Date, if any		Transaction Code (Instr.		Disposed 5)	Of (D) (Inst	r. 3, 4 and	Securities Beneficia	lly (D) o		r Indirect I	Indirect Beneficial		
							(Month/Day/Year)		8)	_	-			Owned Fo	۱	(I) (Ins		Ownership (Instr. 4)		
									Code	V	Amount (A) (D)		Price	Transaction(s) (Instr. 3 and 4)						
Class A Common Share 06/06					06/20	/2024			M		4,373	A	(1)	9,3	9,373		D			
			Table II -											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 Di if any (Month/Day/	ate,	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirati	on Da			ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction	e Over State of Control of Contro	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
												Amount		(Instr. 4)	JII(S)					
									Date				Number							
				[·	Code	ν	(A)	(A) (D)		able	Expiration Date	Title	of Shares							
Share Option	\$19.71	06/05/2024			A		19,040		(2)		06/04/2034	Class A Common Shares	19,040	\$0	19,040	0	D			
Restricted Share Units	(1)	06/05/2024			A		3,173		(3)		(3)	Class A Common Shares	3,173	\$0	3,173		D			
Restricted Share Units	(1)	06/06/2024			M			4,373	(4)		(4)	Class A Common Shares	4,373	\$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 option vests and becomes exercisable in twelve substantially equal monthly installments following the date of the grant. The date of the grant is June 5, 2024.
- 3. The RSUs vest in their entirety on the first anniversary date of the grant, June 5, 2024.
- 4. The RSUs vested in a single installment on June 6, 2024; there was no expiration date for the RSUs.

/s/ Madelyn Zeylikman, 06/07/2024 Attorney-in-Fact

** 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.