FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	D C 20540	
vvasnington.	D.C. 20549	

OTATEMENIT	^=	011441050		DENEELOLAL	OMMIEDOLUB
SIAIEMENI	OF	CHANGES	IN	BENEFICIAL	OWNERSHIP

UMB APPRO	VAL				
OMB Number:	3235-0287				
Estimated average burder	1				
hours per response:	0.5				
	OMB Number: Estimated average burder				

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 2								
Name and Address of Reporting Person*     Naylor Stuart			2. Issuer Name and Ticker or Trading Symbol MeiraGTx Holdings plc [ MGTX ]									lationship of ck all applica Director			n(s) to Issue				
(Last)	(F ST 29TH ST	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/14/2024						<b>Y</b>	below)		Other (spe below) V. OFFICER		pecify		
14TH FI	LOOR						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	ORK N	ΙΥ	10016										)	_	•	•	ting Person One Reporti	ng 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 affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.							satisfy the							
		Т	able I - Noi	n-Deriv	ative	e Sec	curitie	s Acq	uired,	Dis	posed of	, or Ben	eficially	Owned					
Date		2. Transa Date (Month/I	saction 2A. Deemed Execution Date, if any (Month/Day/Year)		Execution Date, if any				es Acquired (A) or Of (D) (Instr. 3, 4 and		5. Amount Securities Beneficial Owned Fo	ly	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
						Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Ordinary Shares 01/1				01/14	1/2024		M		23,750	1) A	(2)	575,492			D				
Ordinary Shares 01/14				4/2024		F		11,163 <sup>(3)</sup> D		\$6.36	564,329			D					
			Table II -								osed of, convertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year) Execution if any	3A. Deemed Execution Dat if any (Month/Day/Ye	Cod	nsactio	on D str. S A D	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		te of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Cod	de V	(4	Date Expiration (A) (D) Exercisable Date		Title	Amount or Number of Shares	Transac (Instr. 4		tion(s)						
Restricted Share Units	(2)	01/14/2024		М	1			23,750	(1)		(1)	Ordinary Shares	23,750	\$0	23,75	50	D		
Restricted Share Units	(2)	01/17/2024		A		1:	50,000		(4)		(4)	Ordinary Shares	150,000	\$0	150,0	00	D		

## **Explanation of Responses:**

- 1. Represents vesting of one-quarter of restricted share units granted on January 14, 2021.
- 2. Each restricted share unit converts into one ordinary share upon vesting.
- 3. Shares withheld for payment of taxes upon vesting of award.
- 4. Fifty percent of the restricted share unit award will vest on the second anniversary of the grant date and twenty-five percent of the restricted share unit award will vest on each of the third and fourth anniversaries of the grant date.

/s/ Richard Giroux, Attorney-in-01/17/2024 Fact for Stuart Naylor

\*\* 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.