SEC Form 4	
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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-0287										
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 193	21
Filed pursuant to Section 10(a) of the Securities Exchange Act of 195	יינ
or Section 30(b) of the Investment Company Act of 1940	

			or Section 30(n) of the investment Company Act of 1940								
1. Name and Address of Reporting Person* <u>Makker Gotham</u>			2. Issuer Name and Ticker or Trading Symbol <u>ROCKET PHARMACEUTICALS, INC.</u> [<u>RCKT</u>]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify							
(Last) C/O ROCKET	(First) PHARMACEU'	(Middle) TICALS, INC.	3. Date of Earliest Transaction (Month/Day/Year) 06/22/2023	below) below)							
9 CEDARBRO	OK DRIVE		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)							
				X Form filed by One Reporting Person							
(Street) CRANBURY	NJ	08512		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 satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
I											

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (Ir 8)	tion	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Disposed Of (D) (Instr. 3, 4 and			Securities Beneficially	Form: Direct	Form: Direct (D) or Indirect g (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(1150.4)					

	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 Date, if any (Month/Day/Year)	4. Transac Code (II 8)		5. Numl of Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3 and 5)	Expiration Date (Month/Day/Year) sed 3, 4			Date Amount of		nt of Derivative ties Security lying (Instr. 5) tive Security		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$21.56	06/22/2023		A		25,850		(1)	06/22/2033	Common Stock	25,850	\$0	25,850	D	
Stock Option (Right to Buy)	\$21.56	06/22/2023		A		2,872		(2)	06/22/2033	Common Stock	2,872	\$13.93	2,872	D	

Explanation of Responses:

1. This option represents a right to purchase a total of 25,850 shares of the Issuer's Common Stock, all of which will become fully vested and exercisable on June 22, 2024.

2. This option represents a right to purchase a total of 2,872 shares of the Issuer's Common Stock, all of which will become fully vested and exercisable on June 22, 2024. This option was issued to the Reporting Person in lieu of director retainer fees of \$40,000.

/s/ Martin Wilson, as attorney-06/26/2023

<u>in-fact</u>

** 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.