## Edgar Filing: AGIOS PHARMACEUTICALS INC - Form 4

AGIOS PHA Form 4 April 03, 201	RMACEUTIC 4	CALS INC									
FORM	1								OMB AI	PROVAL	
					TIES AND EXCHANGE COMMISSION ngton, D.C. 20549				OMB Number:	3235-0287	
Check this if no long subject to	or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								January 31, 2005 average	
				SECURITIES					burden hours per		
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 Section 17(a) of the Public Utility Holding Company Act of 1935 or Sect 30(h) of the Investment Company Act of 1940						1935 or Section	response	0.5			
(Print or Type R	esponses)										
Tessier-Lavigne Marc Symbol				Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			AGIOS [AGIO]	AGIOS PHARMACEUTICALS INC AGIO]				(Check all applicable)			
(Month/				of Earliest Transaction Day/Year) 2013				X_ Director10% Owner Officer (give titleOther (specify below)Other (specify			
	(Street)						<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>				
CAMBRIDO	GE, MA 02139	)						Form filed by N Person			
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	Transaction Date 2A. Deemed bonth/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price			Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common stock	07/24/2013			Р	55,555		\$ 18	101,009	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day e	ate Exercisable and ration Date nth/Day/Year)		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Tessier-Lavigne Marc C/O AGIOS PHARMACEUTICALS, INC. 38 SIDNEY STREET, 2ND FLOOR CAMBRIDGE, MA 02139	Х						
Signatures							
/s/ Glenn Goddard, as Attorney-in-Fact for M Tessier-Lavigne	04/0	3/2014					
<u>**</u> Signature of Reporting Person				Date			

## **Explanation of Responses:**

\* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.