Edgar Filing: Hoerter Steven L. - Form 4

Hoerter Stev Form 4	en L.										
May 29, 201											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMMISSION		PROVAL	
	UNITE	DSIAILO		shington,			NGE C		OMB Number:	3235-0287	
Check th if no long									Expires:	January 31,	
subject to Section 1 Form 4 o Form 5	F CHANGES IN BENEFICIAL OWN SECURITIES						Estimated a burden hour response	•			
obligatio may cont <i>See</i> Instru 1(b).	ns Section 1	7(a) of the	Public U		ling Con	ipany	Act of	e Act of 1934, 1935 or Section 0	1		
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> Hoerter Steven L.			2. Issuer Name and Ticker or Trading Symbol AGIOS PHARMACEUTICALS INC					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			[AGIO]								
			3. Date of Earliest Transaction (Month/Day/Year) 05/23/2018					Director 10% Owner X Officer (give title Other (specify below) below) Chief Commercial Officer			
	EUTICALS, 8	8	0312312	010				Chief Co	ommercial Offi	cer	
			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
CAMBRID	GE, MA 02139)						Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common stock	05/23/2018			M <u>(1)</u>	2,050	A	\$ 39.76	2,050	D		
Common stock	05/23/2018			S <u>(2)</u>	2,050	D	\$ 85.76	0	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.

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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. Transactic Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	ive Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. l De Sec (In
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock option (right to buy)	\$ 39.76	05/23/2018		M <u>(1)</u>	2,050	(3)	02/15/2026	Common stock	2,050	

Reporting Owners

Reporting Owner Name / Address			Relationships		
1	Director	10% Owner	Officer	Other	
Hoerter Steven L. C/O AGIOS PHARMACEUTICALS 88 SIDNEY STREET CAMBRIDGE, MA 02139			Chief Commercial Officer		
Signatures					
/s/ William Cook, as Attorney in Fact Hoerter	for Stever	n L.	05/29/2018		

**Signature of Reporting Person

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).
- (1) This exercise was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.
- (2) This sale was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.
- (3) This option was granted on February 16, 2016. The shares underlying this option vest as to 25% of the underlying shares on February 16, 2017, with the remaining 75% vesting in 36 equal monthly installments thereafter.

Date

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.