FORM 4

Check this box if no longer subject to

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549	
vusilligion,	D.C.	20343	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPI	OMB APPROVAL									
OMB Number:	3235-0287									
Estimated average b	ourden									
hours por rosponso:	0.5									

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

Name and Address of Reporting Person*      Washburn Theodore James Jr.      (Last) (First) (Middle)						Issuer Name and Ticker or Trading Symbol     AGIOS PHARMACEUTICALS, INC. [     AGIO ]      Date of Earliest Transaction (Month/Day/Year)									all appli Directo Officer below)	icable) or (give title		rson(s) to Is 10% Ov Other (s below)	wner specify	
` ,	EY STREE	,	,		08/0	08/01/2023									Princ	Principal Accounting Officer				
(Street)	IIDGE M	A (	02139		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individ ne) X	ividual or Joint/Group Filing (Check Applicab Form filed by One Reporting Person Form filed by More than One Reporting Person				on .	
(City)	(S	tate) (	(Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See															
		Tabl	e I - No	n-Deriv	ative	Sec	uriti	ies Ac	quired,	Dis	posed	of, or B	enefici	ally C	Owne	d				
			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispos		Dispose	urities Acquired (A) sed Of (D) (Instr. 3,		4 and Sec Ber Ow		urities eficially		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount	(A) (D)	Price	Tronco		ction(s)			,ou +j	
Common stock 08				08/01	2023		M		4,150		\$	)	6,891			D				
Common stock 08/01/				2023		S <sup>(1)</sup>		1,232 Г		\$26	.26	6 5,659		D						
		Ta							uired, D , option						vned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	4. Transac Code (li 8)		5. Number of		6. Date Exercisab Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of vative urity tr. 5)	9. Number derivative Securities Securities Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amount or Number of Shares							
Restricted stock units	(2)	08/01/2023			M			4,150	(3)		(3)	Common stock	4,150		\$0	0		D		

## **Explanation of Responses:**

- $1. \ Shares \ sold \ to \ cover \ the \ tax \ withholding \ obligation \ in \ respect \ of \ vesting \ of \ the \ reporting \ person's \ restricted \ stock \ units.$
- 2. Each restricted stock unit represents a contingent right to receive one share of the issuer's common stock.
- 3. The restricted stock units were granted on August 1, 2021. The shares underlying the stock units will vest in full on August 1, 2023. Vested shares will be delivered to the reporting person within three business days after such shares become vested

## Remarks:

/s/ William Cook, as attorneyin-fact for Theodore James Jr. 08/02/2023 Washburn

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.