UNITED STATES SECURITIES AND EXCHANGE CO Washington, D.C. 20549

OMMIS	SION	OMB APPROVAL							
		OMB Number:	3235-0287						
NERSH	lIP	Expires:	December 31, 2014						
Act of 19	934, Section	Estimated average burden							
	30(h) of the	hours per 0. response							
npol	5. Relationship of Reporting Person(s) to								

	Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OW
	obligations may continue. See Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange A 17(a) of the Public Utility Holding Company Act of 1935 or S Investment Company Act of 1940

1. Name and Address of Reporting Person [*] Schenkein David P			2. Issuer Name and Ticker or Trading Symbol AGIOS PHARMACEUTICALS INC [AGIO]	5. Relationship of Reporting Person(s) to Issuer				
	(First) (Middle) GIOS PHARMACEUTICALS, INC., 38 Y STREET, 2ND FLOOR		3. Date of Earliest Transaction (Month/Day/Year) 03/05/2015	(Check all applicable) X Director 10% Owner X Officer (give Other (specify title below) X Difficer (give Other (specify below) Chief Executive Officer Chief Executive Officer				
(Street) CAMBRIDGE MA 02139 (City) (State) (Zip)			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 Form filed by More than One Reporting Person 				

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)	Date	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (Instr. 8)		ispos	Acquired sed of (D) nd 5)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
			Code	v	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)	
Common stock	03/05/2015		S ⁽¹⁾		2,600	D	\$ 110.16 ⁽²⁾	102,501	I	See footnote ⁽³⁾	
Common stock								241,772	I	See footnote ⁽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 (Instr. 8		5. Number		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: 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				

Explanation of Responses:

1. This sale was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.

2. The price reported is the weighted average of the shares sold. The shares were sold at varying prices in the range of \$110.00 to \$110.56. The reporting person undertakes, upon request by the staff of the Securities and Exchange Commission, the issuer, or a security holder of the issuer, to provide full information regarding the number of shares sold at each separate price

3. Shares held by Amy P. Schenkein 2004 Revocable Trust, of which the reporting person's spouse is trustee and beneficiary.

4. Shares held by David P. Schenkein 2004 Revocable Trust, of which the reporting person is trustee and beneficiary.

<u>/s/ Glenn Goddard, as</u> <u>Attorney-in-Fact for David</u> <u>Schenkein</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.