FORM 4

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

Washington, D.C. 20549

OMB APPRO	IB APPROVAL						
OMB Number:	3235-0287						
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					_		- (	.,			ompany A									
1. Name and Address of Reporting Person*  Goddard Glenn						2. Issuer Name and Ticker or Trading Symbol AGIOS PHARMACEUTICALS INC [ AGIO ]									all ap		109	Owner		
(Lost)	/Ei	rst) (	` ├─									X	Officer (give title below)		Oth bel	er (specify				
(Last)	`		3. Date of Earliest Transaction (Month/Day/Year) 02/13/2015									Senior Vice President, Fi			,					
C/O AGIOS PHARMACEUTICALS, INC. 38 SIDNEY STREET, 2ND FLOOR														<u> </u>						
50 SIDNET STREET, 2ND FEOOR						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														X	Form	n filed by One	Reporting F	erson		
CAMBRIDGE MA 02139															Form filed by More than One Reporting Person					
(City)	(St	tate) (	Zip)																	
		Tab	le I -	- Non-Deriv						, Di	sposed	of, or E	enefic	ially						
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				rear) if	Execution Date,			3. Transact Code (In 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3,			4 and 5) See Be			6. Ownershi Form: Direct (D) or Indirect (I)	of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	(Instr. 4)		
Common stock 02/13/201:						5			M <sup>(1)</sup>		1,316	A	\$23	3.1		1,316	D			
Common stock 02/13/2015						5			<b>S</b> <sup>(2)</sup>		1,316	D	\$120.	0.31(3)		0	D			
		Ta	able	II - Deriva							osed of				wned	l				
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 (I 8)	ction	5. ion Number			xerc	isable and	7. Title and Amount of Securities Underlying Underlying Security (Instr. 3 and 4)		8. Pof Deri Secu (Insi	rice ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership		
						ode V (		(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares							
Stock option (right to buy)	\$23.1	02/13/2015			M <sup>(1)</sup>			1,316	(4)		08/27/2023	Common stock	1,316	\$(	0.00	90,669	D			

## Explanation of Responses:

- $1. \ This \ exercise \ was \ effected \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ by \ the \ reporting \ person.$
- $2. \ This \ sale \ was \ effected \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ by \ the \ reporting \ person.$
- 3. The price reported is the weighted average of the shares sold. The shares were sold at varying prices in the range of \$120.00 to \$121.08. 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
- 4. This option was granted on August 28, 2013. The shares underlying this option vest as to 25% of the underlying shares on August 28, 2014, with the remaining 75% vesting in 36 equal monthly installments thereafter.

## Remarks:

<u>/s/ Glenn Goddard</u> <u>02/17/2015</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.