FORM 4

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

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

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

(Last)	. Name and Address of Reporting Person*  NELSEN ROBERT  Last) (First) (Middle)  C/O ARCH VENTURE PARTNERS							2. Issuer Name and Ticker or Trading Symbol AGIOS PHARMACEUTICALS INC [ AGIO ]  3. Date of Earliest Transaction (Month/Day/Year) 06/21/2016								p of Reportin plicable) ttor er (give title w)		Owner er (specify	
	HIGGINS F	ROAD, SUITE 29			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line) X	Form	ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)					tion	ion 2A. Deemed Execution Date,				Disp etion nstr.	4. Securities Acquired Disposed Of (D) (Instr. and 5)			A) or	5. Am Secur Benef Owned Follow Repor Trans	ount of ities icially d ving ted action(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 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. Transaction Code (Instr. 8)		n Number		6. Date Exercisable a Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Security (Instr. 3 and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisable		oiration e	Title	Amous or Number of Shares	er					
Stock option (right to buy)	\$47.33	06/21/2016			A		8,000		(1)	06/	20/2026	Common stock	8,00	0	\$0.00	31,125	D		

## **Explanation of Responses:**

 $1. \ This \ option \ was \ granted \ on \ June \ 21, \ 2016. \ The \ shares \ underlying \ this \ option \ vest \ as \ to \ 100\% \ of \ the \ underlying \ shares \ on \ June \ 21, \ 2017.$ 

## Remarks:

/s/ Glenn Goddard, as Attorney-in-fact for Robert T. 06/23/2016 Nelsen

\*\* 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.