FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:	3235-0104						
Estimated average burden							
hours per response:	0.5						

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* Ballal Rahul D.				Event Requir (Month/Day/								
(Last) C/O AGIOS PHA 88 SIDNEY STRI	(First) RMACEUTICALS, EET	(Middle) INC.				Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title below) Other (specify below)			6.0	If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing (Check Applicable Line)		
(Street) CAMBRIDGE (City)	MA (State)	02139 (Zip)					Officer (give title below)	Other	ei (specily t	Jeiow)	-	One Reporting Person More than One Reporting Person
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					2. Amount Owned (Ins	of Securities Beneficially str. 4)		nership Fo t (D) or Indi .5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)			E	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Deriv Security (Instr. 4)		erivative	4. Conversion or Exercise Price of		6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Expiration Date		Title	itle			Derivative Security	(msu. 5)		

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ William Cook, as attorney-in-fact for 08/15/2022 Rahul Ballal

** Signature of Reporting Person

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 5 (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.

Exhibit 24.1 LIMITED POWER OF ATTORNEY FOR SECTION 16 REPORTING OBLIGATIONS

Know all by these presents, that the undersigned hereby makes, constitutes and appoints each of James Burns and William Cook signing singly and (1) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or a director of Agios Pharmaceuticals, II (2) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to prepare, complete and execut (3) seek or obtain, as the undersignedTMs representative and on the undersignedTMs behalf, information regarding transactions in the Company (4) take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney in fact, may be of The undersigned hereby grants to each such attorney in fact full power and authority to do and perform any and every act and thing whatsoever This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with respect IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 11th day of August, 2022.

Sy Rahul Ballal

/s/ Rahul Ballal

Name: Rahul Ballal