Edgar Filing: PAUL STEVEN M - Form 4

Form 4										
if no longe subject to Section 16 Form 4 or	RM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Statement of Changes in Beneficial Ownership of SECURITIES					OMB APPROVAL OMB 3235-028 Number: January 31 Expires: January 31 200 Estimated average burden hours per response 0.				
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type R	esponses)									
			2. Issuer Name and Ticker or Trading Symbol Sage Therapeutics, Inc. [SAGE]				5. Relationship of Reporting Person(s) to Issuer			
	(First) THERAPEUTIC RST STREET	(1	Date of Earliest Tr Aonth/Day/Year) 3/06/2018	ansaction			Chec Director Officer (give below)		o Owner er (specify	
(Street) 4. If Amendme Filed(Month/Day				U			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CAMBRIDO	GE, MA 02142							Iore than One Re		
(City)	(State)	(Zip)	Table I - Non-D	erivative S	ecurit	ies Aco	uired, Disposed of	f. or Beneficial	lv Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year		d 3. Date, if Transactio Code (/Year) (Instr. 8)		ies Aco sposed	quired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common Stock	03/06/2018		S <u>(1)</u>	58,139	D	\$ 172	632,712	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of	2. Comming	3. Transaction Date		4. Terrer et is	5.	6. Date Exerc		7. Title and	8. Price of	9. Nu Daria
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	(Instr. 8)	nNumber Expiration Date of (Month/Day/Year Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amount of Underlying Securities (Instr. 3 and 4	Derivative Security (Instr. 5) 4)	Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Amoun or Title Numbo of Shares	er	

Reporting Owners

PAUL STEVEN M

215 FIRST STREET CAMBRIDGE, MA 02142

Signatures

Reporting Owner Name / Address

C/O SAGE THERAPEUTICS, INC.

/s/ Anne Marie Cook, as Attorney-in-Fact for Steven M. Paul

**Signature of Reporting Person

Explanation of Responses:

- * 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).
- (1) The sales reported on this Form 4 were effected pursuant to a trading plan adopted pursuant to Rule 10b5-1 under the Securities Exchange Act of 1934, as amended.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

10% Owner Officer Other

Relationships

Director

03/08/2018

Date