Reeve Emma Form 4 December 18, 2018

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

OMB 3235-0287 Number:

Expires:

January 31, 2005

0.5

Estimated average burden hours per

response...

10% Owner

Other (specify

if no longer subject to Section 16. Form 4 or

Check this box

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

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Middle)

(Month/Day/Year) Execution Date, if

1(b).

Form 5

obligations

(Print or Type Responses)

1. Name and Address of Reporting Person *

(First)

Reeve Emma

(Last)

Security

(Instr. 3)

2. Issuer Name and Ticker or Trading

Symbol

PTC THERAPEUTICS, INC.

[PTCT]

3. Date of Earliest Transaction (Month/Day/Year)

12/14/2018

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

C/O PTC THERAPEUTICS

INC., 100 CORPORATE COURT

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

below)

6. Individual or Joint/Group Filing(Check Applicable Line)

X_ Director

Officer (give title

X Form filed by One Reporting Person Form filed by More than One Reporting

SOUTH PLAINFIELD, NJ 07080

(State) (Zip) (City) 1. Title of 2. Transaction Date 2A. Deemed

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

(Instr. 8)

4. Securities 3. TransactionAcquired (A) or Code Disposed of (D) 5. Amount of Securities Beneficially Owned

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (Instr. 4) (Instr. 4)

Following Reported Transaction(s)

(Instr. 3 and 4)

Code V Amount (D) Price

(Instr. 3, 4 and 5)

(A)

or

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

(Month/Day/Year)

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.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Conversion

3. Transaction Date 3A. Deemed

5. Number of (Month/Day/Year) Execution Date, if TransactionDerivative

6. Date Exercisable and **Expiration Date**

7. Title and Amount of Underlying Securities

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| Security (Instr. 3) | or Exercise Price of Derivative Security | | any (Month/Day/Year) | Code (Instr. 8) | Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | (Month/Day/Y | ear) | (Instr. 3 and | 4) |
|--------------------------------------|---|------------|-------------------------|-----------------|--|---------------------|--------------------|-----------------|-------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Stock Option (Right To Buy) | \$ 33.63 | 12/14/2018 | | A | 14,000 | <u>(1)</u> | 12/13/2028 | Common Stock | 14,000 |
| Stock Option (Right To Buy) | \$ 33.63 | 12/14/2018 | | A | 1,167 | 01/03/2019 | 12/13/2028 | Common Stock | 1,167 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|---------|-------|--|--|
| • 5 | Director | 10% Owner | Officer | Other | | |
| Reeve Emma C/O PTC THERAPEUTICS INC. 100 CORPORATE COURT SOUTH PLAINFIELD, NJ 07080 | X | | | | | |

Signatures

/s/ Avraham S. Adler, attorney-in-fact

12/18/2018

**Signature of Reporting Person

Date

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) This option award vests in thirty-six approximately equal monthly installments, commencing on January 14, 2019 and continuing on each successive monthly anniversary of thereafter, ending on the third year anniversary of the grant date.

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.

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