FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	OVAL					
	OMB Number:	3235-0287					
l	Estimated average burd	en					
l	hours per response:	0.5					

	Check this box if no longer subject to
٦.	Section 16. Form 4 or Form 5 obligations may continue. See
J	obligations may continue. See
	Instruction 1(b)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person*  IGUCHI KIMI									ker or Tra				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
								I	,		,	<u> </u>	Direct Office	or r (give title		10% Ov Other (s	-			
(Last) (First) (Middle)							of Earlie	st Tran	saction (N	lonth/	Day/Year)	] ^	below			below)				
C/O SAGE THERAPEUTICS, INC.																				
215 FIRS	ST STREE	1 11	If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable							
(Street)							.numen	t, Date	or Origina	i i iicc	(WOTH)	Line)								
CAMBRIDGE MA 02142											)	X Form filed by One Reporting Person								
					-										Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																	
		Tab	le I - Nor	า-Deriv	ative	e Se	curiti	es Ac	quired	Dis	posed	of, or B	enef	iciall	y Owne	d				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						ar)   i	2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction Dispose Code (Instr. 5)			rities Acquired (A) o ed Of (D) (Instr. 3, 4 a				ies Fe cially (D Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or F	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common	Stock	9/2018	2018			М		800	800 A		\$0.45	26,	26,826(1)		D					
		Т	able II -												Owned					
			(	(e.g., p	uts,	calls	s, war	rants	, optio	ıs, c	onverti	ible sec	uriti	es)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transactic Code (Ins 8)		of Deriv Secu Acqu (A) o Dispo	vative irities ired r osed )	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Cada	,,	(4)	(5)	Date		xpiration	Tielo	or Nur of	ount nber						
Stock Option (Right to Buy)	\$0.45	06/19/2018			M	V	(A)	<b>(D)</b>	(2)	$\top$	9/24/2023	Common Stock	Sha 8	00	\$0.00	67,949	)	D		

## **Explanation of Responses:**

- 1. This balance includes employee stock purchase plans shares.
- 2. The stock option award was issued pursuant to the Sage Therapeutics, Inc., 2011 Stock Option and Incentive Plan. The option vested in full on September 16, 2017, subject to continued service through such date.

## Remarks:

/s/ Anne Marie Cook, as Attorney-in-Fact for Kimi

06/20/2018

<u>Iguchi</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.