FORM 4

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

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

**OMB APPROVAL** OMB Number: Estimated average burden

0.5

hours per response:

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					Τ.									1						
1. Name and Address of Reporting Person*						2. Issuer Name <b>and</b> Ticker or Trading Symbol PTC THERAPEUTICS, INC. [ PTCT ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
SCHMERTZLER MICHAEL							I TIEK!	APE	<u>,011CS</u>	<u>, 11\</u>	<u>кс.</u> [ Р1	CI ]		X		,		10% Ov	vner	
						2. Date of Faulicet Transaction (Month/Day/Marx)										(give title		Other (s	specify	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 01/02/2015									below)			below)			
1300 VALLEY ROAD																				
					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line)		ilad by One	o Done	orting Perso	_	
NEW CA	ANAAN C	Γ	06840											^		•		onling Person One Repor		
-															Person		ie iliai	TOTIC INCPO	ung	
(City)	(S	tate)	(Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of	Security (Inst	tr. 3)		2. Transa	action		2A. Deeme		3.			ties Acqui			5. Amou				7. Nature	
Date (Month/Da					Day/Ye				Code (Instr.   5)			d Of (D) (In	(Instr. 3, 4 and		Beneficia	Beneficially (D) (		r Indirect	of Indirect Beneficial	
					(Month/Day/Yea			r) 8)						Owned Followin Reported		(I) (Instr. 4)		Ownership (Instr. 4)		
									Code	v	Amount	(A) or Pi		Price	Transact (Instr. 3 a					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
	(e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of 2. 3. Transaction 3A. Deemed					4.		5. Number		6. Date Exercisable an		able and	7. Title and Amo		nount	8. Price of	9. Number of		10.	11. Nature	
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution Da		Transaction Code (Instr.				Expiration (Month/Da			of Securities Underlying			Derivative Security	derivative Securities		Ownership Form:	of Indirect Beneficial	
(Instr. 3)	Price of Derivative	of (Month/Day/Year)			)	Securities Acquired			Derivative Secu (Instr. 3 and 4)					urity	(Instr. 5)	Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)	
	Security					(A) or Disposed			(mon. 5 and 4)							Following Reported		(I) (Instr. 4)	(,	
					of (D) (I	nstr.								Transaction(s)						
			$\vdash$	_		3, 4 and 5)					 				(Instr. 4)					
													or	nount						
									Date		Expiration		of	mber						
				C	ode	٧	(A)	(D)	Exercisab	le [	Date	Title	Sh	ares						
Stock Option	051	01/02/2015					24.000		01/02/201		21/01/2025	Commor		000	0.51	24.00	_			
(right to	\$51	01/02/2015			A		24,000		01/02/201	0   (	01/01/2025	Stock	24	,000	\$51	24,00	U	D		

**Explanation of Responses:** 

/s/ Colleen Diver Johnson, attorney-in-fact

01/02/2015

\*\* 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.