FORM 4

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

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

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

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

1. Name and Address of Reporting Person*  ZELDIS JEROME B						2. Issuer Name and Ticker or Trading Symbol PTC THERAPEUTICS, INC. [ PTCT ]								Relationship of Reporting Person(s) to Issue (Check all applicable)     X Director 10% Own.				
(Last)	,	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/22/2024								Officer below)	(give title		Other (s below)	specify
C/O PTC THERAPEUTICS, INC. 500 WARREN CORPORATE CENTER DRIVE				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person					
(Street) WARRE	N N.	J	07059										Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)		-   Ru	Rule 10b5-1(c) Transaction Indication  X Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									d to			
		Tab	le I - No	n-Deri	vative	e Se	curit	ties Ac	quirec	l, Di	sposed o	f, or Be	neficial	y Owned				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date				ır) Ei	A. Deemed xecution Date, any lonth/Day/Year)		3. Transaction Code (Instr. 8)  4. Securities Acquir Disposed Of (D) (Instr. 8)		es Acquired Of (D) (Insti	i (A) or : 3, 4 and 5	Securitie Benefici Owned I	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
										v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)
Common Stock 05/22				2/2024	2024			M		20,000	A	\$26.42	34,500			D		
Common Stock 05/22/2				2/2024	/2024			S		20,000	D	\$38.24	4 <sup>(1)</sup> 14,500			D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	Date, Transac		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$26.42	05/22/2024			М			20,000	(2)		07/31/2024	Common Stock	20,000	\$0	0		D	

## **Explanation of Responses:**

- 1. This price represents the weighted average price of sale transactions that were executed in multiple trades at prices ranging from \$38.20 to \$38.55 per share. The Reporting Person hereby undertakes, upon request by the SEC staff, the issuer or a security holder of the issuer, to provide full information regarding the number of shares sold at each separate price.
- 2. Currently exercisable.

/s/ Avraham S. Adler, Attorney- 05/24/2024

in-Fact

\*\* 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.