FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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

Name and Address of Reporting Person* <u>Hirawat Claudia de Oliveira Ribeiro</u>						2. Issuer Name and Ticker or Trading Symbol PTC THERAPEUTICS, INC. [PTCT]								eck all applic Directo	10% Tgive title Oth		on(s) to Issu 10% Ow Other (s	ner
(Last) (First) (Middle) C/O PTC THERAPEUTICS, INC. 100 CORPORATE COURT						3. Date of Earliest Transaction (Month/Day/Year) 01/15/2015								President				
(Street) SOUTH PLAINFIELD (City) (State) (Zip)				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				action	2/ Ex	A. Dee kecuti any	. Deemed ecution Date,		saction (Instr	4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4		(A) or	5. Amou Securitie Benefici Owned F	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Cod	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3			ion(s)	Instr. 4)
Common Stock 01/15/2					/2015	015			M ⁽¹		2,396	A	\$10.8	5 41	,396		D	
Common Stock 01/15/2					/2015	:015			S ⁽¹⁾		2,149	D	\$57.19	(2) 39	,247		D	
Common Stock														1	94			By Spouse
			Table II ·								posed of, , convertib			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemo Execution if any (Month/Da	Date,	4. Transactic Code (Ins		on of		6. Date Expirat (Month)	on Dat		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercis		Expiration Date	Title	Amount or Number of Shares					
Stock Option (right to	\$10.85	01/15/2015			M ⁽¹⁾			2,396	(3)		05/15/2023 ⁽⁴⁾	Common Stock	2,396	\$0	67,08	4	D	

Explanation of Responses:

- 1. The transactions reported in this Form 4 were effected pursuant to a written Rule 10b5-1 plan.
- 2. This price represents the weighted average price of sale transactions that were executed in multiple trades at prices ranging from \$56.66 to \$57.61 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.
- 3. Pursuant to the Separation and General Release Agreement dated December 16, 2014 between the Reporting Person and the Issuer (the Separation Agreement), the remaining options vest on January 16, 2015
- 4. Pursuant to the Separation Agreement, the remaining options will expire on January 31, 2016.

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

01/16/2015

** 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.