

CONCERT PHARMACEUTICALS, INC.

Reported by **HERSCHA LYNETTE**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 07/10/17 for the Period Ending 07/06/17

Address 99 HAYDEN AVENUE

SUITE 500

LEXINGTON, MA 02421

Telephone 781-860-0045

CIK 0001367920

Symbol CNCE

SIC Code 2834 - Pharmaceutical Preparations

Industry Biotechnology & Medical Research

Sector Healthcare

Fiscal Year 12/31



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

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

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *					Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
HERSCHA LYNETTE					CONCERT PHARMACEUTICALS, INC. [CNCE]								Director		10	% Owner	
(Last) (First) (Middle)			3. Date of Earliest Transaction (MM/DD/YYYY)						C	XOfficer (give title below)Other (specify below) General Counsel							
99 HAYDEN AVENUE, SUITE 500					7/6/2017												
	(Stre	eet)			4. If	Amendn	nent, Date	Origi	nal Filed	(MM/D	D/YYY	YY) 6	. Individual	or Joint/G	roup Filing	(Check Appl	icable Line)
LEXINGTON, MA 02421											_	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																	
			Table	I - Non-l	Deriv	ative Se	curities A	equir	red, Disp	osed o	f, or	Benef	ficially Own	ed			
1. Title of Security (Instr. 3)		2A. Deemed Execution Date, if any		3. Trans. C (Instr. 8)	ode	4. Securities Acquire or Disposed of (D) (Instr. 3, 4 and 5)			Foll	5. Amount of Securities Beneficially Ov Following Reported Transaction(s) (Instr. 3 and 4)			6. 7. Nature Ownership of Indirect Form: Beneficial Direct (D) Ownership				
							Code	V	Amount			ice				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				7/6/2017			A		50000 (1) (2)	<u>A</u>	<u>(3</u>	<u>(3)</u>		50000		D	
	Tab	le II - Der	ivative	Securiti	es Be	eneficial	y Owned (e.g.	, puts, ca	alls, w	arran	nts, op	otions, conve	ertible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date			Acquire Dispose		nber of tive Securities red (A) or red of (D) 3, 4 and 5)		1				Inderlying Derivative Security		derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Со	de	V (A)	(D)	Date	e Exercisable Da	piration ate		Amour Shares	nt or Number of		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

- (1) Each restricted stock unit ("RSU") represents a contingent right to receive one share of Common Stock of the Issuer.
- (2) 50% of the RSUs granted to Ms. Herscha are eligible to vest on March 31, 2018, subject to the achievement certain performance criteria prior to March 31, 2018, including the closing of the Asset Purchase Agreement with Vertex Pharmaceuticals, Inc. and the institution by the Patent Trial and Appeal Board of a Post Grant Review petition filed by the Issuer against Incyte Corporation, and the remaining 50% of the RSUs are time-based awards and will vest on March 31, 2019. The number above represents the maximum number of shares that may be delivered pursuant to the award.
- (3) Not applicable.

Reporting Owners

Paparting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
HERSCHA LYNETTE								
99 HAYDEN AVENUE			General Counsel					
SUITE 500			General Counser					
LEXINGTON, MA 02421								

Signatures

/s/ Ryan Lynch as attorney-in-fact for Lynette Herscha

**Signature of Reporting Person

7/10/2017

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 control number.