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
Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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* <u>Albers Jeffrey W.</u>						2. Issuer Name and Ticker or Trading Symbol Blueprint Medicines Corp [ BPMC ]									elationship o ck all applic Directo	able)	g Pers	on(s) to Issu 10% Ow	
	Last) (First) (Middle) C/O BLUEPRINT MEDICINES CORPORATION 45 SIDNEY STREET						rliest Tran	on (Mont	th/D	ay/Year)	X	below)			Other (s below) ident	pecify			
45 SIDN	EY STREE		If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable						
(Street) CAMBRIDGE MA 02139															X Form filed by One Reporting Person Form filed by More than One Reporting				
(City) (State) (Zip)														Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D.						Exec if any	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Securitie Beneficia Owned F		es For ally (D) Following (I) (		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									Code V	,	Amount	(A) (D)	or P	rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 10/30/						2019			M		20,000 A		:	\$1. <mark>87</mark>	48,	48,961		D	
		•	Table II - C	Derivativ e.g., pu											Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, Tra	Transaction Code (Insti				6. Date Exercisable Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					de V	(A)	(D)	Date Exe	e rcisable		xpiration ate	Title	or	ount nber ires					
Stock Option (Right to	\$1.87	10/30/2019		M			20,000		(1)	07	7/30/2024	Common Stock	20,	,000	\$0	193,90	3	D	

## **Explanation of Responses:**

1. This option was granted on July 30, 2014 and is fully vested.

/s/ Christopher Frankenfield, Attorney-in-Fact

10/30/2019

\*\* 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.