Kauffman M Form 5	Aichael									
February 13	3, 2019									
FORM 5										
-	UNITED			ND EXCHANGE COMMISSION			Number:	3235-0362		
Check th no longe		W	Washington, D.C. 20549				Expires:			
to Sectio Form 4 c 5 obligat may cont <i>See</i> Instr		ATEMENT OF CHANGES IN BENEFICIAI OWNERSHIP OF SECURITIES				Estimated burden ho response.	ours per			
Size instructionFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934,1(b).Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or SectionReported30(h) of the Investment Company Act of 1940TransactionsReported										
1. Name and Address of Reporting Person <u>*</u> Kauffman Michael			2. Issuer Name and Ticker or Trading Symbol Verastem, Inc. [VSTM]			5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Middle) 3. State	3. Statement for Issuer's Fiscal Year Ended			(Check all applicable)				
			(Month/Day/Year) 12/31/2018			XDirector10% Owner Officer (give titleOther (specify				
	STEM, INC., 1 K STREET, SUI	17	12/51/2018			below)	below)	(- F)		
			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Reporting				
					(che	(check applicable line)				
NEEDHAN	M, MA 02494					_X_ Form Filed by Form Filed by Person	One Reporting More than One I			
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securit Acquired Disposed (Instr. 3, -	(A) or of (D)	Securities Beneficially Owned at end	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. 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. S Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned S							SEC 2270 (9-02)			
(e.g., puts, calls, warrants, options, convertible securities)										

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Derivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (A)		

	Derivative Security			or Disposed of (D) (Instr. 3, 4, and 5)						
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 5.59	06/11/2018	Â	A4	25,000	Â	(1)	06/11/2028	Common Stock	25,000

Reporting Owners

		Relationships						
Reporting Owner Name / Addres	S	Director	10% Owner	Officer	Other			
Kauffman Michael C/O VERASTEM, INC. 117 KENDRICK STREET, SUITE NEEDHAM, MA 02494	500	X	Â	Â	Â			
Signatures								
/s/ Sean Flynn, Attorney-in-Fact	02/13/	/2019						
**Signature of Reporting Person	Da	ate						

Explanation of Responses:

* 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).

The option vests in twelve equal monthly installments (with the number of shares vesting on each vesting date rounded down to the nearest whole share, except with respect to the final vesting date on which the remaining unvested portion shall vest), beginning on

(1) Inclusive whole share, except whit respect to the initial vesting date on which the remaining unvested portion shart vest), beginning on 7/11/2018 and ending on 06/11/2019, provided that the Reporting Person continues to serve as a director of the Issuer on each such vesting date.

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Remarks:

Exhibit List: Exhibit 24 - Power of Attorney

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.