Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

wasnington,	D.C. 20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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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>Kelly Timothy Edwin</u>				2. Issuer Name and Ticker or Trading Symbol Praxis Precision Medicines, Inc. [PRAX]								5. Relationshi (Check all app Direct		licable) tor	ng Per	10% Ov	vner		
(Last)	(Fir	st) (M	Middle)	INC.		3. Date of Earliest Transaction (Month/Day/Year) 05/14/2024							X	belov	er (give title v) Chief Finar	ncial	Other (specify below)		
99 HIGH STREET, 30TH FLOOR				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Chroat)												X	X Form filed by One Reporting Person						
(Street) BOSTON MA 02110														Form filed by More than One Reporting Person					
(City) (State) (Zip)					Rul	Rule 10b5-1(c) Transaction Indication													
						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.													
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	uired	, Dis	posed of	, or E	Benefic	ially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				Execution D		ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Se Be Ov		5. Amount of Securities Beneficially Owned Following		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) o	r Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 05/14.			05/14/2	2024		A ⁽¹⁾		606	A	\$12.	368	4,340			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	version xercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Transaction Code (Instr. 8) Service (A) Discription of Cod			rities ired r osed)	Expiration Date (Month/Day/Year) Securi Under Deriva Securi 3 and 4			nt of ities rlying ative ity (Instr. 4)	Der Sec (Ins	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y 1	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. These shares were acquired under the Praxis Precision Medicines, Inc. Employee Stock Purchase Plan in transactions that were exempt under both Rule 16b-3(d) and Rule 16b-3(c).

Remarks:

/s/ Alex Nemiroff, as Attorney-in-Fact

05/20/2024

** 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.