FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response:								

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

1. Name and Address of Reporting Person* Kelly Timothy Edwin						2. Issuer Name and Ticker or Trading Symbol Praxis Precision Medicines, Inc. [PRAX]								(Chec	k all app Direc	tionship of Reportical applicable) Director Officer (give title		son(s) to Is 10% Ov Other (s	wner	
(Last) (First) (Middle) C/O PRAXIS PRECISION MEDICINES, INC. 99 HIGH STREET, 30TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 06/09/2022								X	below	below) below) Chief Financial Officer			. ,	
(Street) BOSTOM			2110 Zip)		4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	''					
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	, Dis	posed of	, or E	Benefi	cially	y Own	ed				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (E 5)					4 and Secur Benet		ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	v	Amount	(A) (D)	or Pri	ce	Transa	action(s) . 3 and 4)			(mou. 4)				
Common Stock 06/09/20						2022			P		10,000	A	\$1	.765	765 40,490			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	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, //Day/Year)	4. Transaction Code (Instr. 8)		of Deriv	r osed) r. 3, 4	Expiration Day/\(Month/Day/\)		ite	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y C	IO. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		(A)	(D)	Date Exercis	able	Expiration Date	Title	or Number of Shares							

Explanation of Responses:

Remarks:

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

06/13/2022

** Signature of Reporting Person

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.