SEC Form 4	
------------	--

## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Section 16. Form 4 or Form 5 obligations may continue. See							TOF CHANGES IN BENEFICIAL OWNERSHIP									Estim	OMB Number: 3235-0 Estimated average burden hours per response:		
matruc	uon 1(b).			FI					Investmen					54					
transac contrac the pur securit to satis conditio	chase or sale of	pursuant to a written plan for of equity r that is intended ve defense																	
1. Name and Address of Reporting Person <sup>*</sup> Souza Marcio						2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Praxis Precision Medicines, Inc.</u> [ PRAX ]								(Ch	Relationship eck all applie	cable)	Reporting Person(s) to Issuer ble) 10% Owner		
(Last) (First) (Middle) C/O PRAXIS PRECISION MEDICINES, INC.				2.		3. Date of Earliest Transaction (Month/Day/Year) 01/10/2025									below)	(give title	Other (s below) Officer	pecify	
99 HIGE	I STREET,	30TH FLOOR																	
(Street) BOSTO	N M	Ā	02110									Line	<ul> <li>adividual or Joint/Group Filing (Check Applicable</li> <li>Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting</li> <li>Person</li> </ul>						
(City)	(S	tate)	(Zip)			Person													
		Tah	le I - Nor	n-Deriv	vativ	e Se	curities	s Acc	nuired	Disr	osed o	f. or	Ben	eficial	ly Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ction 2A. Deemed Execution Date			e, Transaction Disp Code (Instr. 5)		Disposed	ecurities Acquired (A) posed Of (D) (Instr. 3, 4			Benefici Owned F	es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Dwnership
								Code	v	Amount	nount		Price	Reporter Transact (Instr. 3	ction(s)			(Instr. 4)	
Common Stock 01/10/					0/202	/2025		A		37,500 <sup>(1)</sup>		Α	\$0	53	,960	D			
Common Stock														3,	000	Ι		Held by	
		-	Table II -												Owned				a
						call	-		, option										
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution I if any (Month/Day	4. Transa Code ( 8)		of		6. Date Exercisa Expiration Date (Month/Day/Year			7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	e S Ily I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisab		xpiration	Title		Amount or Number of Shares					
Stock Option (Right to Buy)	\$63.15	01/10/2025			Α		75,000		(2)	0	1/10/2035	Com Sto		75,000	\$0	75,000	0	D	
	n of Bospond																		

ation of Respo

1. Mr. Souza was awarded 37,500 restricted stock units. Each restricted stock unit represents a contingent right to receive one share of the Issuer's Common Stock. The restricted stock units vest in equal annual installments over a four-year period beginning on the one-year anniversary of the vesting commencement date of January 10, 2025. The restricted stock units may be settled only by delivering shares of the Issuer's Common Stock, and thus, the grant is being reported in Table 1 as allowed per SEC guidance.

2. The shares underlying this stock option vest over a four-year period, with 25% vesting on January 10, 2026 and the remaining 75% vesting in 36 equal monthly installments thereafter, subject to the reporting person's continued service through each vesting date.

**Remarks:** 

s/	Ale	x N	lemi	roff,	as	Attorn	ey-	~	• •		0	
								0	17	14	121	125

Ī

٦

in-Fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  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.