| SEC For | m 4 | | | | | | | | | | | | | | | | | |
|---|---|--|--|--------------------|--|---------------|---------------------|--|--|-------------------------------|---|--|--|--|--|--|--|--|
| FORM 4 UNITED S | | | | STA | TATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | | OMB APPROVAL | | | |
| Section 16. Form 4 or Form 5 obligations may continue. See | | | | | NT OF CHANGES IN BENEFICIAL OWNERSHIP | | | | | | | | | Estima | OMB Number: 3235-0287 Estimated average burden hours per response: 0.5 | | | |
| 1. Name and Address of Reporting Person [*] Smith Julie | | | | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
| (Last) C/O STC | (Last) (First) (Middle) C/O STOKE THERAPEUTICS, INC. | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/07/2022 | | | | | | | | Officer (give title Other (specify below) below) | | | | becify | |
| 45 WIGGINS AVENUE (Street) BEDFORD MA 01730 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Line | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| BEDFOR (City) | | | 01730 (Zip) | | | | | | | | | | Form f Persor | | re than | One Report | ing | |
| | | Tab | ole I - Non | -Deriva | ative | e Se | curities | s Ac | quired, D | isposed o | of, or Be | neficial | ly Owned | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | Executio | | | Date | Transaction Dispose Code (Instr. 5) | | ities Acquir d Of (D) (Ins | ed (A) or str. 3, 4 and | Beneficia Owned F | s ally ollowing | Form: (D) or | m: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code V | Amount | (A) o (D) | r Price | Reported Transact (Instr. 3 a | ion(s) | | | nstr. 4) | |
| | | - | Table II - E | Derivat e.q., p | tive uts, | Secu calls | urities s, warr | Acq ants | uired, Dis s, options | posed of converti | , or Ben ble secu | eficially urities) | 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, T | e, Transacti Code (Ins | | 5. Number ion of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | e s Ily J | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | c | ode | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Director Stock Option (Right to Buy) | \$12.96 | 06/07/2022 | | | A | | 21,000 | | (1) | 06/06/2032 | Common Stock | 21,000 | \$0.00 | 21,000 | 0 | D | | |

Explanation of Responses:

1. The option shall vest on June 7, 2023 or, if earlier, the next annual meeting of the issuer's stockholders, subject to the reporting holder's continued service on such vesting date. Remarks:

| /s/ Stephen Tulipano, Attorney- | 06/08/2022 |
|---------------------------------|------------|
| in-Fact | 00/08/2022 |

** 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.