FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMB APPRO	JVAL				
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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

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Name and Address of Reporting Person* Nash Huw M.					2. Issuer Name and Ticker or Trading Symbol Stoke Therapeutics, Inc. [STOK]								Check	tionship of Reporting P all applicable) Director		g Per	10% Ov	vner			
	`	APEUTICS, INC	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 12/01/2021									X Officer (give title Other (specify below) COO & CBO					
(Street) BEDFOI	RD M	Ā	01730		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								i. Indivine)	′						
(City)	(5		(Zip)	Nam David				: 4				- f D		-11	0						
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			ion	n 2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an		(A) or		5. Amount of Securities Beneficially Owned Follov		Form: ly (D) or		7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) or (D)	Price			erted saction(s) : 3 and 4)			(Instr. 4)		
Common Stock 12/01/202					021	1		М		5,700	Α	\$2.1	\$2.19		5,700		D				
Common Stock 12/01/202				021	21		S ⁽¹⁾		3,200	D	\$23.96	23.9605 ⁽²⁾		,500		D					
Common Stock 12/01/202			021	21			S ⁽¹⁾		2,500	D	\$25.06	25.0624 ⁽³⁾		0		D					
		T	Table								sposed of				wned						
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execution Date		4. Transa Code (8)			Expira	e Exer ation D h/Day/		nd 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amour or Number of Shares	er							
Employee Stock Option (Right to	\$2.19	12/01/2021			M			5,700	(4	4)	12/12/2028	Common Stock	5,700)	\$0.00	90,622	2	D			

Explanation of Responses:

- 1. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.
- 2. The reported price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$23.45 to \$24.42 per share, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 3. The reported price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$24.56 to \$25.13 per share, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote
- 4. The option vested as to 1/48th of the total shares on November 22, 2018, and then 1/48th of the total shares vest monthly thereafter, subject to the reporting person's continued service to the issuer through each vesting date

Remarks:

/s/ Stephen Tulipano, Attorney-12/03/2021 in-Fact

** 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.