FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average I	ourden								
hours per response	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

IIISIIUC	1011 10.																			
1. Name and Address of Reporting Person* <u>Kaye Edward M. MD</u>				2. Issuer Name and Ticker or Trading Symbol Stoke Therapeutics, Inc. [STOK]									(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable)						
						ı.				-				Director	or		10% Ov	vner		
(Last) (First) (Middle)				3 [Date of Earliest Transaction (Month/Day/Year)									- [Officer below)	(give title		Other (s below)	specify	
C/O STOKE THERAPEUTICS, INC.				/01/2						, ,				CEO						
45 WIGGINS AVENUE																				
				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line)															
(Street) BEDFOI	RD M	Λ	01730													_	filed by One	Repo	orting Perso	n
,	TVI		01730													Form filed by More than One Reporting Person				rting
(City)	(S	tate)	(Zip)													1 01001	•			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transa Date (Month/L			2A. Deemed Execution Date, if any (Month/Day/Yea		Transaction Dispose Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)						
					Code V Amount (A) or P		Price	Transact	Transaction(s) (Instr. 3 and 4)			(111341. 4)								
Common Stock 12/01				1/202	4		M 21,591 A		\$0	48,591			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 (Instr. 3) 3. Transaction Date Execution Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)			ate, T	ransaction of Code (Instr. Derivative		Expiration Date of Section (Month/Day/Year) Underly Derivation			of Secur Underly Derivati	Fitle and Amount Securities derlying rivative Security etr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	s Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
				c	Code	v	(A)	(D)	Date Exercis	able	Exp Dat	piration te	Title	OI No	umber					
Restricted Stock Unit (RSU)	(1)	12/01/2024			M			21,591	(2)		12/	01/2025	Commo	2	1,591	\$0	4,317	,	D	

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of the Issuer's Common Stock.
- 2. 21,591 restricted stock units will vest on December 1, 2024 and 4,317 will vest on December 1, 2025, subject to the reporting person's continued service to the Issuer on each such date.

/s/ Jonathan Allan, Attorney-in-Fact 12/03/2024

** 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.