FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden 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.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person* <u>Ticho Barry</u>						2. Issuer Name and Ticker or Trading Symbol Stoke Therapeutics, Inc. [STOK]								neck all a	pplica rector	,		vner	
(Last) (First) (Middle) C/O STOKE THERAPEUTICS, INC. 45 WIGGINS AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 09/03/2024								be	low)	.0	below) DICAL OFFICE		. ,
(Street) BEDFORD MA 01730 (City) (State) (Zip)				Jan Davis	-	Line)													
1. Title of Security (Instr. 3) 2. Tran				2. Transact Date	. Transaction		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an		(A) or	5. Amou Securiti Benefic		int of 6. 0 Foi ially (D) Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price	Tra	nsacti str. 3 a	ion(s)			(Instr. 4)
Common Stock 09/03/20								M		10,000	A	\$0.6			2,485		D		
Common Stock 09/03/20 Common Stock 09/03/20								S ⁽¹⁾		9,400	D D	\$14.918° \$15.408°			3,085 2,485		D D		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Executi	(e.g.,		calls	s, warrants				, convertil	or Beneficial ble securities 7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)			e of tive ty 5)	of 9. Number derivative Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)
						v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares						
Stock Option (Right to Buy)	\$0.6	09/03/2024			M	10,000		(4)		04/02/2028	Common Stock	10,000	\$0		30,000		D		

- 1. The transactions reported on this Form 4 were executed pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 14, 2023.
- 2. The reported price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$14.35 to \$15.34 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 ranges set forth in this footnote and in footnote 3, below.
- 3. The reported price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$15.35 to \$15.47 per share, inclusive.
- 4. This fully-vested option vested as to 1/4th of the total award on October 2, 2018, with 1/48th of the total award vesting monthly thereafter, subject to the reporting person's continued service to the issuer through each vesting date.

/s/ Jonathan Allan, Attorney-in-Fact

** Signature of Reporting Person

09/05/2024

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.