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 burden								
- 1	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).

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

1. Name and Address of Reporting Person*  TABUTEAU HERRIOT					2. Issuer Name and Ticker or Trading Symbol Axsome Therapeutics, Inc. [ AXSM ]							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director X 10% Owner					
(Last)	Last) (First) (Middle) C/O AXSOME THERAPEUTICS, INC.				3. Date of Earliest Transaction (Month/Day/Year) 02/27/2024							]	X Officer (give title Other (specify below)  CHIEF EXECUTIVE OFFICER					
ONE WORLD TRADE CENTER, 22ND FLOOR					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW YORK NY 10007													X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)				F	Rule 10b5-1(c) Transaction Indication													
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
		Tab	le I - Non-D	)erivati	ve Se	curities	s Ac	quired, D	ispos	ed o	f, or Bei	neficiall	y Owned					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execut		Date	Transaction Disp Code (Instr. 5)			curities Acquired (A) or sed Of (D) (Instr. 3, 4 an		5. Amou Securitie Beneficia Owned F Reported	es ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code V	Am	Amount (A)		Price	Transaction(s) (Instr. 3 and 4)				(111001. 4)	
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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	Code	saction (Instr.			6. Date Exer Expiration D (Month/Day/	ate	and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v v	(A)	(D)	Date Exercisable	Expira Date	ation	Title	Amount or Number of Shares						
Employee Stock Option (Right to Buy)	\$84	02/27/2024		A		87,192		(1)	02/26/	2034	Common Stock	87,192	\$0.00	87,19	2	D		
Restricted Stock Units	(2)	02/27/2024		A		47,886		(3)	(3)	)	Common Stock	47,886	\$0.00	47,88	6	D		

## **Explanation of Responses:**

- 1. The option will vest in substantially equal quarterly installments over four years such that the option will be fully vested on February 27, 2028.
- 2. Each restricted stock unit ("RSU") represents a contingent right to receive one share of the Issuer's common stock.
- 3. 25% of the RSUs will vest on the one (1) year anniversary of the date of grant. The remaining RSUs will vest in in three substantially equal annual installments, such that the RSUs will be fully vested on February 27, 2028. Vested shares will be delivered to the reporting person upon the earlier of (i) the closing of a Change in Control (as defined in the Issuer's Amended and Restated 2015 Omnibus Incentive Compensation Plan (the "Plan"), (ii) the reporting person's separation of service from the Issuer (including termination with or without Cause (as defined in the Plan), or termination due to death or disability), or (iii) seven (7) years from the date of grant.

/s/ Herriot Tabuteau, M.D. 02/29/2024

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.