FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

washington, D.C. 20549

| STATEMENT | OF CHANG | ES IN BENEF | ICIAL O | WNERSHIP |
|-----------|----------|-------------|---------|----------|
| | | | | |

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

| | | | | | 01 | r Sec | tion 30(h) o | f the Ir | ivestmer | nt Cor | npany Act | of 1940 | | | | | | | | |
|--|--------|---------------|--------------------------|---------------------------|---|---|-------------------------|---|---|--|----------------|----------|---|---|--|----------------------|--|---------------------------------------|------------|--|
| 1. Name and Address of Reporting Person* TABUTEAU HERRIOT | | | | | 2. Issuer Name and Ticker or Trading Symbol Axsome Therapeutics, Inc. [AXSM] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| IABUI | EAU HE | <u>IRRIU1</u> | | | | | | | , | | | | | X | Director | | X | 10% O | vner | |
| (Last) | (Fi | rst) | (Middle) | | | Date of Earliest Transaction (Month/Day/Year) | | | | | | | | - X | Officer (below) | give title | | Other (: below) | specify | |
| 25 BROADWAY, 9TH FLOOR | | | 11/ | 11/24/2015 | | | | | | | | | Chief Executive Officer | | | | | | | |
| (Street) | | | | | 4. 1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Ind Line) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| NEW YC | ORK N | Y | 10004 | | | | | | | | | | X | Form filed by One Reporting Person | | | | | | |
| (City) | (St | tate) | (Zip) | | - | Form filed by More than One Reporting Person | | | | | | | | | ting | | | | | |
| | | Ta | ble I - Noi | n-Deri | vativ | e Se | ecurities | Acq | uired, | Dis | posed o | f, or Be | nef | icially | Owned | | | | | |
| Date | | | Date | ansaction th/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | 5. Amoun Securities Beneficia Owned Fo | s lly ollowing | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or 1 | Price | Transacti (Instr. 3 a | on(s) | | | (111511.4) | |
| Common Stock | | 11/2 | 11/24/2015 | | | | С | | 7,229 | | | \$5.94 | 7,229 | | | D | | | | |
| Common Stock | | | | | | | | | | | | | 7,344,500 | | | I | By Antecip Capital LLC ⁽¹⁾ | | | |
| | | | Table II - | | | | curities A ls, warra | | | | | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security | | | Execution Date,) if any | | 4. Transa Code (l 8) | | Derivative | | 6. Date Exercisa Expiration Date (Month/Day/Yea | | of Securities | | curity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Followin Reported | e es ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | Code | | | | | Expiration Date | Title | or Nu of | umber | | Transaction(s (Instr. 4) | | | | | | |

(2)

Explanation of Responses:

\$5.94

Convertible

1. The reporting person is the managing member of Antecip Capital LLC and so may be deemed to beneficially own such shares of common stock.

A

2. Consists of an 8% Convertible Note with a principal balance of \$41,469.47 and interest accrued through November 24, 2015 of \$1,472.

/s/ Constance Ames, Attorney-

7,229(2)

\$<mark>0</mark>

11/24/2015

0

D

in-Fact

Stock

06/16/2025

** 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).

11/24/2015

** 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.

7,229(2)