FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

II OI	MB APPROVAL

OMB Number: 3235-0287
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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).

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

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

Instruct	ion 10.	55-1(c). See																		
1. Name and Address of Reporting Person* Benecchi Christopher							2. Issuer Name and Ticker or Trading Symbol Sage Therapeutics, Inc. [SAGE]									of Reporting Perscable) or (give title		son(s) to Iss 10% Ov Other (s	vner	
(Last) (First) (Middle) C/O SAGE THERAPEUTICS, INC. 55 CAMBRIDGE PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 11/01/2024									Officer (give title Other (spec below) Chief Operating Officer					
(Street) CAMBRIDGE MA 02142 (City) (State) (Zip)					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Disposed Code (Instr. 5)					5. Amou Securitie Beneficia Owned F Reported	es Fo ally (D) Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or F	Price	Transact (Instr. 3	ion(s)			(111341. 4)	
Common Stock 11.				11/01	1/202	4			A		6,250	(1) A		\$0.00	24,	24,737		D		
		•	Table II - I (osed of, onvertil				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution E if any (Month/Day	ate, 1	ransaction ode (Instr.		of		Expiration	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nu of	mber ares						
Stock Option (Right to buy)	\$6.05	11/01/2024			Α		12,500		(2)	1	11/01/2034	Common Stock	12	,500	\$0.00	12,500)	D		

Explanation of Responses:

- 1. Consists of shares of common stock issuable under 6,250 restricted stock units ("RSUs") awarded to the Reporting Person pursuant to the Sage Therapeutics, Inc. 2024 Equity Incentive Plan (the "Plan"). Each RSU represents the right to receive one share of Common Stock upon vesting. These RSUs are scheduled to vest in equal annual installments over four years with the first installment vesting on November 1, 2025, subject to the Reporting Person's continued service.
- 2. The option was granted on November 1, 2024 pursuant to the Plan. The shares underlying the option vest over four years, with 25% of the shares vesting on November 1, 2025, and the remainder vesting in equal monthly installments thereafter, subject to the Reporting Person's continued service.

Remarks:

Greg Shiferman, attorney in fact for BENECCHI
CHRISTOPHER

** Signature of Reporting Person

11/14/2024

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.