FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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* Carrico Thomas Joeseph 2. Date of Event Requiring Statem (Month/Day/Year)		Statement ay/Year)	3. Issuer Name and Ticker or Trading Symbol Neuraxis, INC [NRXS]							
(Last) (First) (Middle) C/O NEURAXIS, INC. 11550 N. MERIDIAN STREET, SUITE 325	08/08/20	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give Other (specify title below) below) CHIEF REGULATORY OFFICER				5. If Amendment, Date of Original Filed (Month/Day/Year)				
(Street) CARMEL IN 46032 (City) (State) (Zip)							eck Applicable Form filed to Person	by One Reporting		
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)		2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)					
Common Stock			10,000	D						
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4) 2. Date Exerci Expiration Dat (Month/Day/Ye		ate	3. Title and Amount of Sec Underlying Derivative Sec (Instr. 4)		4. Conversion or Exercise Price of		Form:	6. Nature of Indirect Beneficial Ownership (Instr.		
	Date Exercisable	Expiration Date		Amount or Number of Shares	Derivative Security		Direct (D) or Indirect (I) (Instr. 5)	5)		
Options (Right to Buy)	09/09/2021	09/13/2029	Common Stock	306,236	6.94		D			

Explanation of Responses:

/s/ Thomas Carrico

08/08/2023

** 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 5 (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.