FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL             |               |  |  |  |  |  |
|--------------------------|---------------|--|--|--|--|--|
| OMB Number:              | 3235-<br>0104 |  |  |  |  |  |
| Estimated average burden |               |  |  |  |  |  |
| hours per                | 0.5           |  |  |  |  |  |

## 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 Pers<br>Clarence Daniel Jerome                         | on <sup>*</sup> 2. Date of<br>Requiring<br>(Month/Da | Statement   | 3. Issuer Name and Ticker or Trading Symbol Neuraxis, INC [ NRXS ]  |                            |  |   |   |  |
|---|--|---|---|----------------------------|--|---|---|--|
| (Last) (First) (Middle)<br>C/O NEURAXIS, INC.<br>11550 N. MERIDIAN STREET,<br>SUITE 325 | 08/08/20   | 23  | 4. Relationship of Reporting Issuer (Check all applicable)          | 10% O<br>Other (<br>below) | wner<br>(specify                                       | If Amendment,<br>ed (Month/Day                                    | Date of Original<br>/Year)                                |  |
| (Street) CARMEL IN 46032 (City) (State) (Zip)   |  |   |   |                            | (C   | heck Applicable  X Form filed Person                              | by One Reporting by More than One                         |  |
|   | Table I - Noi  | n-Derivati  | ve Securities Benefi  | cially Ov                  | vned   |   |   |  |
|   |  | 2. Amount of Securities<br>Beneficially Owned (Instr.<br>4) | 3. Owner<br>Form: D<br>(D) or In<br>(I) (Instr                      | oirect Ow<br>direct        | ature of Indirect Beneficial<br>lership (Instr. 5)     |   |   |  |
|   |  |   |   |                            |  |   |   |  |
|   |  |   | Securities Beneficiants, options, convert                           |                            |  |   |   |  |
| 1. Title of Derivative Security (Instr. 4   | (e.g., puts, cal                                     | lls, warrar<br>cisable and<br>ate                           |   | ible sec                   | 4.<br>Conversior<br>or Exercise                        | Form:   | 6. Nature of<br>Indirect Beneficial<br>Ownership (Instr.  |  |
| 1. Title of Derivative Security (Instr. 4   | (e.g., puts, cal                                     | ils, warrar cisable and ate Year) Expiration                | 3. Title and Amount of Se<br>Underlying Derivative Se               | ible sec                   | urities)  4. Conversior                                | Ownership   | Indirect Beneficial                                       |  |
| Title of Derivative Security (Instr. 4     Options (Right to Buy)                       | 2. Date Exerc Expiration D (Month/Day/               | ils, warrar cisable and ate Year) Expiration                | 3. Title and Amount of Se<br>Underlying Derivative Se<br>(Instr. 4) | Amount or Number of        | 4. Conversior or Exercise Price of Derivative          | Ownership<br>Form:<br>Direct (D)<br>or Indirect                   | Indirect Beneficial<br>Ownership (Instr.                  |  |
|   | 2. Date Exercisable  Date Exercisable                | is, warrar cisable and ate Year)  Expiration Date           | 3. Title and Amount of Se<br>Underlying Derivative Se<br>(Instr. 4) | Amount or Number of Shares | 4. Conversior or Exercise Price of Derivative Security | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 5) | Indirect Beneficial<br>Ownership (Instr.<br>5)  By Sierra |  |

## **Explanation of Responses:**

1. The Series A Preferred Stock and Series Seed Preferred Stock do not have an expiration date.

/s/ Dan Clarence

08/09/2023

\*\* 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 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.