The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 **FORM D**

OMB APPROVAL OMB Number: 3235-00

OMB Number: 3235-0076 Estimated average burden hours per response: 4.00

Notice of Exempt Offering of Securities

1. Issuer's Identity			
11 100 del 0 lucility			
CIK (Filer ID Number)	Previous Names	X None	Entity Type
0001782303			X Corporation
Name of Issuer			Limited Partnership
Boundless Bio, Inc.			Limited Liability Company
Jurisdiction of Incorporation/0	Organization		
DELAWARE	3		General Partnership
Year of Incorporation/Organiz	zation		Business Trust
X Over Five Years Ago			Other (Specify)
Within Last Five Years (S	Specify Year)		
Yet to Be Formed			
recto Bo r offined			
2. Principal Place of Busine	ss and Contact Information		
Name of Issuer			
Boundless Bio, Inc.			
Street Address 1		Street Address 2	
9880 Campus Point Drive		Suite 120	
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer
San Diego	CALIFORNIA	92121	(858) 766-9912
3. Related Persons			
Last Name	First Name		Middle Name
Hornby	Zachary		D.
Street Address 1	Street Address 2		
9880 Campus Point Drive	Suite 120		
City	State/Province/Co	ountry	ZIP/PostalCode
San Diego	CALIFORNIA		92121
Relationship: X Executive C	Officer X Director Promoter		
Clarification of Response (if N	lecessary):		
Last Name	First Name		Middle Name
Lim, M.D.	Jonathan		
Street Address 1	Street Address 2		
9880 Campus Point Drive	Suite 120		
City	State/Province/Co	ountry	ZIP/PostalCode
San Diego	CALIFORNIA		92121
Relationship: Executive O	officer X Director Promoter		
Clarification of Response (if N	lecessary):		
Last Name	First Name		Middle Name
Burow	Kristina		
Street Address 1	Street Address 2		
9880 Campus Point Drive	Suite 120		
City	State/Province/Co	ountry	ZIP/PostalCode
San Diego	CALIFORNIA		92121
Relationship: Executive O	officer X Director Promoter		
. Ц			

Clarification of Response (if Necessary):			
Last Name	First Name	Middle Name	
Cravatt, Ph.D.	Benjamin		
Street Address 1	Street Address 2		
9880 Campus Point Drive	Suite 120		
City	State/Province/Country	ZIP/PostalCode	
San Diego	CALIFORNIA	92121	
Relationship: Executive Officer X Di			
Clarification of Response (if Necessary):			
Last Nama	First Name	Middle Name	
Last Name	First Name	Middle Name	
Brennan, Ph.D.	Christine Street Address 2		
Street Address 1	Street Address 2 Suite 120		
9880 Campus Point Drive		ZID/Da stal Carda	
City	State/Province/Country	ZIP/PostalCode	
San Diego	CALIFORNIA	92121	
Relationship: Executive Officer X Di	rector Promoter		
Clarification of Response (if Necessary):			
Last Name	First Name	Middle Name	
Lew	Jennifer		
Street Address 1	Street Address 2		
9880 Campus Point Drive	Suite 120		
City	State/Province/Country	ZIP/PostalCode	
San Diego	CALIFORNIA	92121	
Relationship: Executive Officer X Di	rector Promoter		
Clarification of Response (if Necessary):			
Last Name	First Name	Middle Name	
Loven, Ph.D.	Jakob		
Loven, Ph.D. Street Address 1	Jakob Street Address 2		
Street Address 1 9880 Campus Point Drive	Street Address 2 Suite 120	ZIP/PostalCode	
Street Address 1 9880 Campus Point Drive City	Street Address 2	ZIP/PostalCode 92121	
Street Address 1 9880 Campus Point Drive	Street Address 2 Suite 120 State/Province/Country CALIFORNIA		
Street Address 1 9880 Campus Point Drive City San Diego	Street Address 2 Suite 120 State/Province/Country CALIFORNIA		
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Diego Clarification of Response (if Necessary):	Street Address 2 Suite 120 State/Province/Country CALIFORNIA	92121	
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Di Clarification of Response (if Necessary): Last Name	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name		
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Di Clarification of Response (if Necessary): Last Name Pucci, Ph.D.	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio	92121	
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Di Clarification of Response (if Necessary): Last Name Pucci, Ph.D. Street Address 1	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2	92121	
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Die Clarification of Response (if Necessary): Last Name Pucci, Ph.D. Street Address 1 9880 Campus Point Drive	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120	92121 Middle Name	
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Di Clarification of Response (if Necessary): Last Name Pucci, Ph.D. Street Address 1 9880 Campus Point Drive City	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country	92121 Middle Name ZIP/PostalCode	
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Di Clarification of Response (if Necessary): Last Name Pucci, Ph.D. Street Address 1 9880 Campus Point Drive City San Diego	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country CALIFORNIA	92121 Middle Name	
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Die Clarification of Response (if Necessary): Last Name Pucci, Ph.D. Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Die	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country CALIFORNIA	92121 Middle Name ZIP/PostalCode	
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Di Clarification of Response (if Necessary): Last Name Pucci, Ph.D. Street Address 1 9880 Campus Point Drive City San Diego	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country CALIFORNIA	92121 Middle Name ZIP/PostalCode	
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Die Clarification of Response (if Necessary): Last Name Pucci, Ph.D. Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Die	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country CALIFORNIA	92121 Middle Name ZIP/PostalCode	
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Di Clarification of Response (if Necessary): Last Name Pucci, Ph.D. Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Di Clarification of Response (if Necessary):	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country CALIFORNIA	92121 Middle Name ZIP/PostalCode	
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Di Clarification of Response (if Necessary): Last Name Pucci, Ph.D. Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer X Di Clarification of Response (if Necessary):	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter	Middle Name ZIP/PostalCode 92121 Retailing	
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer Die Clarification of Response (if Necessary): Last Name Pucci, Ph.D. Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer Die Clarification of Response (if Necessary): 4. Industry Group Agriculture Banking & Financial Services	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter Health Care X Biotechnology	Middle Name ZIP/PostalCode 92121 Retailing Restaurants	
Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer Die Clarification of Response (if Necessary): Last Name Pucci, Ph.D. Street Address 1 9880 Campus Point Drive City San Diego Relationship: Executive Officer Die Clarification of Response (if Necessary): 4. Industry Group Agriculture Banking & Financial Services Commercial Banking	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter Health Care X Biotechnology Health Insurance	Middle Name ZIP/PostalCode 92121 Retailing	
Street Address 1 9880 Campus Point Drive City San Diego Relationship:	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter Health Care X Biotechnology	Middle Name ZIP/PostalCode 92121 Retailing Restaurants	
Street Address 1 9880 Campus Point Drive City San Diego Relationship:	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter Health Care X Biotechnology Health Insurance Hospitals & Physicians	Middle Name ZIP/PostalCode 92121 Retailing Restaurants Technology Computers	
Street Address 1 9880 Campus Point Drive City San Diego Relationship:	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter Health Care X Biotechnology Health Insurance Hospitals & Physicians Pharmaceuticals	Middle Name ZIP/PostalCode 92121 Retailing Restaurants Technology Computers Telecommunications	
Street Address 1 9880 Campus Point Drive City San Diego Relationship:	Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter First Name Fabio Street Address 2 Suite 120 State/Province/Country CALIFORNIA rector Promoter Health Care X Biotechnology Health Insurance Hospitals & Physicians	Middle Name ZIP/PostalCode 92121 Retailing Restaurants Technology Computers	

the Investment Company the Investment Company Act of 1940? Yes No Other Banking & Financial Services Business Services Energy Coal Mining Electric Utilities Energy Conservation Environmental Services	Commercial Construction REITS & Finance Residential Other Real Estate	☐ Airlines & Airports ☐ Lodging & Conventions ☐ Tourism & Travel Services ☐ Other Travel ☐ Other	
Oil & Gas Other Energy			
5. Issuer Size			
Revenue Range OR No Revenues \$1 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$100,000,000 Over \$100,000,000 X Decline to Disclose Not Applicable	Aggregate Net Asset Vi No Aggregate Net A \$1 - \$5,000,000 \$5,000,001 - \$25,000 \$25,000,001 - \$100,000 Over \$100,000,000 Decline to Disclose Not Applicable	00,000 000,000	
6. Federal Exemption(s) and Exclusion(s) Cla	imed (select all that apply)	
Rule 504(b)(1) (not (i), (ii) or (iii)) Rule 504 (b)(1)(i) Rule 504 (b)(1)(ii) Rule 504 (b)(1)(iii) X Rule 506(b) Rule 506(c) Securities Act Section 4(a)(5)	Investment Comp Section 3(c)(1) Section 3(c)(2) Section 3(c)(3) Section 3(c)(4) Section 3(c)(5) Section 3(c)(6) Section 3(c)(7)	Section 3(c) Section 3(c)(9) Section 3(c)(10) Section 3(c)(11) Section 3(c)(12) Section 3(c)(13) Section 3(c)(14)	
7. Type of Filing			
X New Notice Date of First Sale 2023-04-05 Amendment	First Sale Yet to Occur		
8. Duration of Offering Does the Issuer intend this offering to last more	· L]No	
9. Type(s) of Securities Offered (select all tha	t apply)		
Equity Debt Option, Warrant or Other Right to Acquire All Security to be Acquired Upon Exercise of Open Right to Acquire Security	nother Security	Pooled Investment Fund Interests Tenant-in-Common Securities Mineral Property Securities Other (describe)	
10. Business Combination Transaction			
Is this offering being made in connection with a merger, acquisition or exchange offer?	business combination transa	action, such as a Yes X No	

11. Minimum Investment		
Minimum investment accepted from any outside investor \$0 USI	D	
12. Sales Compensation		
Recipient	Recipient CRD Number X None	
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number $\overline{\mathbf{X}}$ None	
Street Address 1	Street Address 2	
City	State/Province/Country	ZIP/Postal Code
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	Foreign/non-US	
13. Offering and Sales Amounts		
Total Offering Amount \$100,000,000 USD or Indefinite		
Total Amount Sold \$100,000,000 USD		
Total Remaining to be Sold \$0 USD or Indefinite		
Clarification of Response (if Necessary):		
14. Investors		
Select if securities in the offering have been or may be sold enter the number of such non-accredited investors who alre Regardless of whether securities in the offering have been convestors, enter the total number of investors who already have	ady have invested in the offering. or may be sold to persons who do not qualify as accredited	26
15. Sales Commissions & Finder's Fees Expenses		
Provide separately the amounts of sales commissions and finder an estimate and check the box next to the amount.	rs fees expenses, if any. If the amount of an expenditure is no	ot known, provide
Sales Commissions \$0 USD Estimate		
Finders' Fees \$0 USD Estimate		
Clarification of Response (if Necessary):		
16. Use of Proceeds		
Provide the amount of the gross proceeds of the offering that has be named as executive officers, directors or promoters in respon the box next to the amount.		
\$0 USD Estimate		
Clarification of Response (if Necessary):		
Signature and Submission		
Please verify the information you have entered and review the to file this notice.	he Terms of Submission below before signing and clickin	ng SUBMIT below

Terms of Submission

In submitting this notice, each issuer named above is:

Clarification of Dechance (if Necessary)

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Boundless Bio, Inc.	/s/ Zachary D. Hornby	Zachary D. Hornby	CEO, President, and Director	2023-08-14

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.

^{*} This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.