## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington,	D.C.	20549

STATEMENT	OF	CHANGES	IN B	ENEFIC	IAL	OWNER	SHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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  Wellington Biomedical Innovation Master					Boundless Bio, Inc. [ BOLD ]								(Check all applicable)  Director X 10% Owner				
Investo	<u>rs (Caym</u>	<u>an) I L.P.</u>			3. Date of Earliest Transaction (Month/Day/Year) 04/02/2024							Officer ( below)	give title		Other (s below)	pecify	
LLP	•	irst) N MANAGEME FREET	(Middle) NT COMPA		4. If Amendment, Date of Original Filed (Month/Day/Year)					Line)	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(Street)	N M	ÍΑ	02210		Rule 10b5-1(c) Transaction Indication					t to a contract	ntract, instruction or written plan that is intended to satisfy						
(City)	(S	State)	(Zip)		the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
		Ta	able I - Non	-Deriva	tive S	ecui	rities Acc	quired,	Dis	posed o	f, or Be	neficially	Owned				
Dat				2. Transac Date (Month/Da	Day/Year)   Execution		cution Date,	Transaction Disposed (		ies Acquire Of (D) (Ins	d (A) or tr. 3, 4 and 5)	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	Amount	(A) o	Price	Reported Transaction (Instr. 3 ar				(111501. 4)			
Common	Stock			04/02/2	2024			C		189,93	33 A	(1)	189,	189,933 D			
Common	Stock			04/02/2	2024			C		366,30	00 A	(2)	(2) 556,233 D				
			Table II - E	Derivati e.g., pu	ve Sed ts, cal	curit Is, v	ties Acqu warrants,	iired, C option	)ispo	osed of, onvertib	or Bene ole secu	eficially C	wned				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Security or Exercise (Month/Day/Year) if any		Code	nsaction de (Instr. Securities Acquired (or Dispose (D) (Instr. 3 and 5)		vative urities uired (A) disposed of (Instr. 3, 4	Expiration Date of Se (Month/Day/Year) Under		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	e s ally g	Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	ion(s)		
Series B Preferred Stock	(1)	04/02/2024		С			3,703,704	(1)		(1)	Common Stock	189,933	\$0	0		D	
Series C Preferred Stock	(2)	04/02/2024		C			7,142,857	(2)		(2)	Common Stock	366,300	\$0	0		D	

## **Explanation of Responses:**

1. On April 2, 2024, the Series B Preferred Stock automatically converted into Common Stock on a 19.5-for-1 basis without payment of further consideration upon the closing of the initial public offering of the Issuer's common stock. The Series B Preferred Stock had no expiration date.

2. On April 2, 2024, the Series C Preferred Stock automatically converted into Common Stock on a 19.5-for-1 basis without payment of further consideration upon the closing of the initial public offering of the Issuer's common stock. The Series C Preferred Stock had no expiration date.

Wellington Biomedical
Innovation Master Investors
(Cayman) II L.P. By:
Wellington Management
Company LLP, as Investment
Adviser /s/ Peter McIsaac, Title:
Authorized Person

\*\* 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 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.