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

Notice of Exempt Offering of Securities

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

1. Issuer's Identity

| 1. Issuer's ruentity | | | |
|-------------------------------|-----------------------------|------------------|---------------------------|
| CIK (Filer ID Nu | nber) Previous X I Names | None | Entity Type |
| <u>0001768446</u> | | | X Corporation |
| Name of Issue | r | | Limited Partnership |
| Eliem Therapeutics, Inc. | | | Limited Liability Company |
| Jurisdiction of | | | General Partnership |
| Incorporation/Orga | nization | | Business Trust |
| DELAWARE | | | Other (Specify) |
| Year of Incorpora | tion/Organization | | |
| Over Five Years Ago | | | |
| X Within Last Five Years (| Specify Year) 2018 | | |
| Yet to Be Formed | | | |
| 2. Principal Place of Busines | s and Contact Information | | |
| Name | of Issuer | | |
| Eliem Therapeutics, Inc. | | | |
| Street A | Address 1 | Street | Address 2 |
| 23515 NE NOVELTY HIL | L RD SUITE B221 #125 | | |
| City | State/Province/Country | ZIP/PostalCode | Phone Number of Issuer |
| REDMOND | WASHINGTON 9 | 8053 | 14252762300 |
| 3. Related Persons | | | |
| Last Name | First Na | ame | Middle Name |
| Azelby | Robert | | |
| Street Address 1 | Street Add | dress 2 | |
| c/o Eliem Therapeutics, Inc | 23515 NE Novelty H #125 | lill Rd Ste B221 | |
| City | State/Provinc | e/Country | ZIP/PostalCode |
| Redmond | WASHINGTON | 98053 | |
| Relationship: X Executive | Officer X Director Promoter | | |
| Clarification of Response (if | Necessary): | | |
| Last Name | First Na | ame | Middle Name |
| Bucher | James | | |
| Street Address 1 | Street Add | | |
| c/o Eliem Therapeutics, Inc | 23515 NE Novelty H #125 | lill Rd Ste B221 | |

CityState/Province/CountryZIP/PostalCodeRedmondWASHINGTON98053Relationship: X Executive OfficerDirectorPromoter

Clarification of Response (if Necessary):

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| c/o Elien Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125ZIP/PostalCodeRedmondKate/Province/CountryZIP/PostalCodeRedmondWASHINGTON98053Relationshie:Executive Office's Direct's PromoterCarification of Response (if Necessary streament of Response (if Necessary)Middle NameLevinKaterMiddle NameLevinAndrewMiddle NameLevinStreet Address 1Street Address 2Co Elien Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125ZIP/PostalCodeRedmondMASHINGTON98053RedmontKASHINGTON98053Redmont response (if Necessary)PromoterCityStreet Address 2Middle NameRatcliffeLiamStreet Address 1Street Address 1Street Address 2Co Elien Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125Co Elien Therapeutics, Inc.Street Address 2Co Elien Therapeutics, Inc.Street Address 2Co Elien Therapeutics, Inc.Street Address 2Co Elien Therapeutics, Inc.Street Address 2CityMaster Province/Country Hill Rd Ste B221 Hight StreetStreet Address 1Street Address 2CityMaster Province/Country Hill Rd Ste B221 Hight StreetStreet Address 2Street Address 2CityMaster Province/Country Hill Rd Ste B221 Hight StreetKater Mater Mate | Tate | Simon | |
| City State/Province/Country ZIP/PostalCode Redmond WASHINGTON 98053 Relationship: Executive Officer X Director Promoter Clarification of Response (if Necessary): Middle Name Last Name First Name Middle Name Levin Andrew Street Address 1 Street Address 2 c/o Eliem Therapeutics, Inc. 23515 NE Novelty Hill Rd Ste B221 #125 City City State/Province/Country Redmond WASHINGTON Relationship: Executive Officer X Director Province/Country ZIP/PostalCode Redmond WASHINGTON Relationship: Executive Officer X Director City State/Province/Country ZIP/PostalCode Street Address 2 City Street Address 2 City <t< td=""><td>Street Addres</td><td>ss 1 Street Address 2</td><td></td></t<> | Street Addres | ss 1 Street Address 2 | |
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| Relationship:Executive Officer X DirectorPromoterClarification of Response (if Necessary:Last NameFirst NameMiddle NameLevinAndrewStreet Address 1Street Address 2Street Address 123515 NE Novelty Hill Rd Ste B221 #125Co Elien Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125CityState/Province/Country2IP/PostalCodeRedmondWASHINGTON98053Relationship:Executive Officer X DirectorPromoterClarification of Response (if Necessary:PromoterInternet of Street Address 1Last NameFirst NameMiddle NameKatcliffeLiamStreet Address 1Street Address 2Co Elien Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125Co Elien Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125Co Elien Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125Co Elien Therapeutics, Inc.33515 NE Novelty Hill Rd Ste B221 #125Co Elien Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125Co Elien Therapeutics, Inc.Street Province/Country #125CityState/Province/Country #125CityState/Province/Country #125CityState/Province/Country #125KateroneState/Province/CountryKateroneState/Province/CountryStateroneState/Province/CountryStateroneState/Province/CountryKateroneState/Province/Country <tr< th=""><th>City</th><th>State/Province/Country</th><th>ZIP/PostalCode</th></tr<> | City | State/Province/Country | ZIP/PostalCode |
| Clarification of Response (if Necessary): Last Name First Name Middle Name Levin Andrew Street Address 1 Street Address 2 23515 NE Novelty Hill Rd Ste B221 23515 NE Novelty Hill Rd Ste B221 c/o Eliem Therapeutics, Inc. #125 City State/Province/Country Redmond WASHINGTON WASHINGTON 98053 Relationship: Executive Officer X Director Promoter Promoter Clarification of Response (if Necessary): Last Name First Name Middle Name Address 1 Street Address 2 Co Eliem Therapeutics, Inc. 23515 NE Novelty Hill Rd Ste B221 clarification of Response (if Necessary): Last Name First Name Middle Name Ratcliffe Liam Street Address 1 Street Address 2 c/o Eliem Therapeutics, Inc. 23515 NE Novelty Hill Rd Ste B221 r/o Eliem Therapeutics, Inc. 23515 NE Novelty Hill Rd Ste B221 r/o Eliem Therapeutics, Inc. 23515 NE Novelty Hill Rd Ste B221 r/o Eliem Therapeutics, Inc. 23515 NE Novelty Hill Rd Ste B221 r/o Eliem Therapeutics, Inc. State/Province/Country Redmond WASHINGTON Redmond WASHINGTON | Redmond | WASHINGTON | 98053 |
| Last NameFirst NameMiddle NameLevinAndrewStreet Address 1Street Address 223515 NE Novelty Hill Rd Ste B221 #12523515 NE Novelty Hill Rd Ste B221 #125CityState/Province/CountryZIP/PostalCodeRedmondWASHINGTON98053Relationship:Executive Officer X DirectorPromoterClarification of Response (if Necessary):First NameMiddle NameRatcliffeLiamMiddle NameStreet Address 1Street Address 2c/o Eliem Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125CityState/Province/CountryZIP/PostalCodeRatcliffeLiamStreet Address 1Street Address 2c/o Eliem Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125CityState/Province/CountryZIP/PostalCodeRedmondWASHINGTON98053 | Relationship: Executi | ve Officer X Director Promoter | |
| LevinAndrewStreet Address 1Street Address 2Street Address 223515 \vee Novelty Hill Rd Ste B221 #225CityStreet Province/CountryZIP/PostalCodeRedmondWASHINGTON98053Redationship:Executive Office \vee PromoterFirst NameMiddle NameAddress 2Street Address 2Street Address 2Street Address 2Colspan="4">Street Address 2CityStreet Address 2CityStreet Address 2Street Address 2Street Address 2Colspan="4">CityStreet Address 2Colspan="4">CityStreet Address 2Colspan="4">CityStreet Address 2Colspan="4">Street Address 2Street Address 2Colspan="4">CityStreet Address 2Colspan="4">CityStreet Address 2CityStreet Address 2Street Address 2Colspan="4">Street Address 2Colspan="4">Street Address 2CityStreet Address 2< | Clarification of Response | e (if Necessary): | |
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| 23515 NE Novelty Hill Rd Ste B221 #125 City State/Province/Country Redmond WASHINGTON Relationship: Executive Officer X Director Promoter Promoter Clarification of Response (if Necessary): Middle Name Last Name First Name Middle Name Ratcliffe Liam Street Address 1 Street Address 2 c/o Eliem Therapeutics, Inc. 23515 NE Novelty Hill Rd Ste B221 #125 Street Address 1 Ketter Street Address 2 City State/Province/Country Ketdmond WASHINGTON WASHINGTON 98053 | Levin | Andrew | |
| CityState/Province/CountryZIP/PostalCodeRedmondWASHINGTON98053Relationship:Executive Officer X DirectorPromoterClarification of Response (if Necessary):FromoterLast NameFirst NameKatcliffeLiamStreet Address 1Street Address 2c/o Eliem Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125CityState/Province/CountryZIP/PostalCodeRedmondWASHINGTON98053 | Street Addres | ss 1 Street Address 2 | |
| RedmondWASHINGTON98053Relationship:Executive Officer X Director PromoterClarification of Response (if Necessary):First NameMiddle NameLast NameFirst NameMiddle NameRatcliffeLiamStreet Address 1Street Address 2c/o Eliem Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125CityState/Province/CountryZIP/PostalCodeRedmondWASHINGTON98053 | c/o Eliem Therapeutics, | Inc. | 1 |
| Relationship: Executive Officer X Director Promoter Clarification of Response (if Necessar): Last Name First Name Middle Name Ratcliffe Liam Street Address 1 Street Address 2 c/o Eliem Therapeutics, Inc. 23515 NE Novelty Hill Rd Ste B221 #125 totage State/Province/Country ZIP/PostalCode Redmond WASHINGTON 98053 | City | State/Province/Country | ZIP/PostalCode |
| Last Name First Name Middle Name Last Name First Name Middle Name Ratcliffe Liam Street Address 1 Street Address 2 C/o Eliem Therapeutics, Inc. 23515 NE Novelty Hill Rd Ste B221 #125 ZIP/PostalCode Redmond WASHINGTON 98053 | Redmond | WASHINGTON | 98053 |
| Last NameFirst NameMiddle NameRatcliffeLiamStreet Address 1Street Address 2c/o Eliem Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125CityState/Province/CountryRedmondWASHINGTON98053 | Relationship: Executi | ve Officer X Director Promoter | |
| RatcliffeLiamStreet Address 1Street Address 2c/o Eliem Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125CityState/Province/CountryZIP/PostalCodeRedmondWASHINGTON98053 | Clarification of Response | e (if Necessary): | |
| Street Address 1Street Address 2c/o Eliem Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125CityState/Province/CountryZIP/PostalCodeRedmondWASHINGTON | Last Name | e First Name | Middle Name |
| c/o Eliem Therapeutics, Inc.23515 NE Novelty Hill Rd Ste B221 #125CityState/Province/CountryZIP/PostalCodeRedmondWASHINGTON98053 | Ratcliffe | Liam | |
| Column Therapeutics, Inc.#125CityState/Province/CountryZIP/PostalCodeRedmondWASHINGTON98053 | Street Addres | ss 1 Street Address 2 | |
| Redmond WASHINGTON 98053 | c/o Eliem Therapeutics, | | 1 |
| | City | State/Province/Country | ZIP/PostalCode |
| Relationship: Executive Officer X Director Promoter | Redmond | WASHINGTON | 98053 |
| | Relationship: Executi | ve Officer X Director Promoter | |

| Last Name First Name | | Middle Name |
|----------------------------------------|-------------------------------------------|----------------|
| Rosenberg | Adam | |
| Street Address 1 | Street Address 2 | |
| c/o Eliem Therapeutics, Inc. | 23515 NE Novelty Hill Rd Ste B221 #125 | 1 |
| City | State/Province/Country | ZIP/PostalCode |
| Redmond | WASHINGTON | 98053 |
| Relationship: Executive Officer | X Director Promoter | |

Clarification of Response (if Necessary):

| Last Name | Middle Name | |
|-------------------------------------------------|-------------------------------------------|----------------|
| Dunn | Judith | |
| Street Address 1 | Street Address 2 | |
| c/o Eliem Therapeutics, Inc. | 23515 NE Novelty Hill Rd Ste B221 #125 | |
| City | State/Province/Country | ZIP/PostalCode |
| Redmond | WASHINGTON | 98053 |
| Relationship: Executive Officer <i>X</i> | C Director Promoter | |

Clarification of Response (if Necessary):

| Last Name | First Name | Middle Name | |
|----------------------------------------------------|-------------------------------------------|----------------|--|
| Patterson | Leone | | |
| Street Address 1 | Street Address 2 | | |
| c/o Eliem Therapeutics, Inc. | 23515 NE Novelty Hill Rd Ste B221 #125 | | |
| City | State/Province/Country | ZIP/PostalCode | |
| Redmond | WASHINGTON | 98053 | |
| Relationship: Executive Officer λ | X Director Promoter | | |
| Clarification of Response (if Necessa Last Name | ry): First Name | Middle Name | |
| Last Name Lavelle | Erin | Middle Name | |
| Street Address 1 | Street Address 2 | | |
| c/o Eliem Therapeutics, Inc. | 23515 NE Novelty Hill Rd Ste B221 #125 | | |
| City | State/Province/Country | ZIP/PostalCode | |
| Redmond | WASHINGTON | 98053 | |
| Relationship: X Executive Officer | Director Promoter | | |
| Clarification of Response (if Necessa | ary): | | |
| Last Name | First Name | Middle Name | |

| Last Name | First Name | Middle Name |
|------------------------------------------|-------------------------------------------|----------------|
| Morisset | Valerie | |
| Street Address 1 | Street Address 2 | |
| c/o Eliem Therapeutics, Inc. | 23515 NE Novelty Hill Rd Ste B221 #125 | |
| City | State/Province/Country | ZIP/PostalCode |
| Redmond | WASHINGTON | 98053 |
| Relationship: X Executive Officer | Director Promoter | |

Clarification of Response (if Necessary):

4. Industry Group

Oil & Gas

| Agriculture | | Health Care | Retailing |
|----------------------------------|--------------------|----------------------------|---------------------------|
| Banking & Financial Services | | Biotechnology | Restaurants |
| Commercial Ban | king | Health Insurance | Technology |
| Insurance | | Hospitals & Physicians | Computers |
| Investing | ing | X Pharmaceuticals | Telecommunications |
| Investment Bank | 0 | | |
| Pooled Investmen | nt Fund | Other Health Care | Other Technology |
| Is the issuer regis | | Manufacturing | Travel |
| an investment co | 1 0 | Real Estate | Airlines & Airports |
| the Investment C Act of 1940? | ompany | Commercial | Lodging & Conventions |
| Yes | No | Construction | Tourism & Travel Services |
| Other Banking & | Financial Services | REITS & Finance | Other Travel |
| Business Services | | Residential | Other |
| Energy | | Other Real Estate | |
| Coal Mining | | | |
| Electric Utilities | | | |
| Energy Conserva | tion | | |
| Environmental S | ervices | | |

Other Energy

5. Issuer Size

| OR | Aggregate Net Asset Value Range |
|----|---------------------------------|
| | No Aggregate Net Asset Value |
| | \$1 - \$5,000,000 |
| | \$5,000,001 - \$25,000,000 |
| | \$25,000,001 - \$50,000,000 |
| | \$50,000,001 - \$100,000,000 |
| | Over \$100,000,000 |
| | Decline to Disclose |
| | Not Applicable |
| | OR |

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

| | Investment Company Act Section 3(c) | | |
|-----------------------------------------|-------------------------------------|--------------------|--|
| Rule 504(b)(1) (not (i), (ii) or (iii)) | Section 3(c)(1) | Section 3(c)(9) | |
| Rule 504 (b)(1)(i) | Section 3(c)(2) | Section 3(c)(10) | |
| Rule 504 (b)(1)(ii) | Section 3(c)(3) | Section 3(c)(11) | |
| Rule 504 (b)(1)(iii) | Section 3(c)(4) | Section 3(c)(12) | |
| X Rule 506(b) | | | |
| Rule 506(c) | Section 3(c)(5) | Section 3(c)(13) | |
| Securities Act Section 4(a)(5) | Section 3(c)(6) | Section $3(c)(14)$ | |
| | Section 3(c)(7) | | |

- 7. Type of Filing
- X New Notice Date of First Sale 2021-05-21 First Sale Yet to Occur Amendment
- 8. Duration of Offering

Does the Issuer intend this offering to last more than one year? Yes X No

9. Type(s) of Securities Offered (select all that apply)

| X Equity | Pooled Investment Fund Interests |
|---------------------------------------------------------------------------------------------|----------------------------------|
| Debt | Tenant-in-Common Securities |
| Option, Warrant or Other Right to Acquire Another Security | Mineral Property Securities |
| Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security | Other (describe) |

10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer? Yes X No

Clarification of Response (if Necessary):

11. Minimum Investment

Minimum investment accepted from any outside investor \$0 USD

12. Sales Compensation

| (Associated) Broker or Dea | aler X None | | | Associated) Broker or Dealer CRD Number | X None | |
|-----------------------------------------------------------------------|------------------|------------|---------|--------------------------------------------|--------|--------------------|
| Street | Address 1 | | | Street Address 2 | | |
| City | | | S | tate/Province/Country | | ZIP/Postal Code |
| State(s) of Solicitation (sel Check "All States" or chec States | 11 0 / | All Sta | | Foreign/non-US | | |
| 13. Offering and Sales Amo | ounts | | | | | |
| Total Offering Amount | \$59,999,987 USD | or | Indefin | ite | | |
| Total Amount Sold | \$59,999,987 USD | | | | | |
| Total Remaining to be Sold | \$0 USD | or | Indefin | ite | | |
| Clarification of Response (i | f Necessary): | | | | | |
| 14. Investors | | | | | | |

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

| 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 been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check 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 Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- 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 |
|--------------------------|---------------------|-----------------|-----------------------|------------|
| Eliem Therapeutics, Inc. | /s/ James B. Bucher | James B. Bucher | EVP & General Counsel | 2021-05-27 |

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.