SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

3235-OMB Number: 0104

Estimated average burden 0.5

hours per response:

## **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*	2. Date of E Requiring S (Month/Day 10/21/202	Statement //Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Xilio Therapeutics, Inc.</u> [ XLO ]     4. Relationship of Reporting Person(s) to     5. If Amendment, Date of Original				
(Last) (First) (Middle) PO BOX 32 (Street) SKILLMAN NJ 08558 (City) (State) (Zip)	_		4. Relationship of Reporting Issuer (Check all applicable) Director Officer (give title below)	10% C	) Wner (specify	<ul> <li>5. If Amendment, Date of Original Filed (Month/Day/Year)</li> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>X Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting Person</li> </ul>	
Table I - Non-Derivative Securities Beneficially Owned							
1. Title of Security (Instr. 4)			and the securities and the security of the security and the secu			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Stock			131,117	D			
Table II - Derivative Securities Beneficially Owned           (e.g., puts, calls, warrants, options, convertible securities)							
1. Title of Derivative Security (Instr. 4)	2. Date Exerc Expiration D (Month/Day/	ate	3. Title and Amount of So Underlying Derivative So (Instr. 4)		4. Convers or Exerc	rcise Form: f Direct (D) tive or Indirect	Ownership (Instr.
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivativ Security		5)

**Explanation of Responses:** 

## /s/ Simon Tomlinson

Person

\*\* Signature of Reporting

Date

10/21/2021

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.