FORM 3

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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## 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

Name and Address of Reporting Person*     Versant Ventures III, LLC		2. Date of Event Requiring Statement (Month/Day/Year) 08/18/2023	3. Issuer Name and Ticker or Trading Symbol Skye Bioscience, Inc. [ SKYE ]			
(Last) ONE SANSOM	(First) IE STREET, SUI	(Middle)	4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner  Officer (give title Other (specify		6. Individual or Joint/Group Filing (Check	
(Street) SAN FRANCISCO	CA	94104		below) below)	Form filed by One Reporting Person  X Form filed by More than One Reporting Person	
(City)	(State)	(Zip)				

### Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	1 '
Common Stock	498,978,878	I	By Versant Venture Capital III, L.P.(1)
Common Stock	2,946,924	I	By Versant Side Fund III, L.P.(2)

# Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		Conversion or Exercise	Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Indirect (I) (Instr. 5)		
Warrant (Right to Buy)	08/18/2023	08/18/2033	Common Stock	130,043,230	0.0206	I	By Versant Venture Capital III, L.P. <sup>(1)</sup>	
Warrant (Right to Buy)	08/18/2023	08/18/2033	Common Stock	768,124	0.0206	I	By Versant Side Fund III, L.P. <sup>(2)</sup>	

1. Name and Address of Reporting Person *					
Versant Ventures III, LLC					
(Last)	(First)	(Middle)			
ONE SANSOME ST	REET, SUITE 1650				
(Street)					
SAN FRANCISCO	CA	94104			
,					
(City)	(State)	(Zip)			
1. Name and Address of I	Reporting Person *				
Versant Venture	Capital III, L.P.				
(Last)	(First)	(Middle)			
ONE SANSOME ST	REET, SUITE 1650				
(Street)					
SAN FRANCISCO	CA	94104			
(City)	(State)	(Zip)			

1. Name and Address of Reporting Person*  Versant Side Fund III, L.P.					
(Last) ONE SANSOME ST	(First)	(Middle)			
(Street) SAN FRANCISCO	CA	94104			
(City)	(State)	(Zip)			

#### **Explanation of Responses:**

- 1. Securities are directly held by Versant Venture Capital III, L.P. ("Versant Ventures III, LLC ("Versant Ventures III")) is the sole general partner of Versant III and may be deemed to share voting and dispositive power over the securities held by Versant III. Versant Ventures III disclaims beneficial ownership of such securities, except to the extent of its pecuniary interest therein.
- 2. Securities are directly held by Versant Side Fund III, L.P. ("Side Fund III"). Versant Ventures III is the sole general partner of Side Fund III and may be deemed to share voting and dispositive power over the securities held by Side Fund III. Versant Ventures III disclaims beneficial ownership of such securities, except to the extent of its pecuniary interest therein.

## Remarks:

Versant Ventures III, LLC, By /s/ 08/28/2023 Max Eisenberg, Chief Operating Officer Versant Venture Capital III, L.P., By Versant Ventures III, LLC, its 08/28/2023 General Partner, By /s/ Max Eisenberg, Chief Operating Officer Versant Side Fund III, L.P., By Versant Ventures III, LLC, its 08/08/2023 General Partner, By /s/ Max Eisenberg, Chief Operating Officer \*\* Signature of Reporting Person Date

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.