

OMB APPROVAL	
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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

1. Name and Address of Reporting Person* <u>ATAI Life Sciences N.V.</u> <hr/> (Last) (First) (Middle) <u>KRAUSENSTRASSE 9-10</u> <hr/> (Street) <u>BERLIN 2M 10117</u> <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>01/01/2022</u>	3. Issuer Name and Ticker or Trading Symbol <u>COMPASS Pathways plc [ CMPS ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

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

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Ordinary Shares	9,565,774	I	By ATAI Life Sciences AG <sup>(1)</sup>

**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)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person* <u>ATAI Life Sciences N.V.</u> <hr/> (Last) (First) (Middle) <u>KRAUSENSTRASSE 9-10</u> <hr/> (Street) <u>BERLIN 2M 10117</u> <hr/> (City) (State) (Zip)
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1. Name and Address of Reporting Person* <u>ATAI Life Sciences AG</u> <hr/> (Last) (First) (Middle) <u>KRAUSENSTRASSE 9-10</u> <hr/> (Street) <u>BERLIN 2M 10117</u> <hr/> (City) (State) (Zip)
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**Explanation of Responses:**

1. Securities held of record by ATAI Life Sciences AG, which is a wholly owned subsidiary of ATAI Life Sciences N.V., and as a result, ATAI Life Sciences N.V. may be deemed to share beneficial ownership over the Ordinary Shares held of record by ATAI Life Sciences AG.

**Remarks:**

ATAI Life Sciences N.V., 02/28/2022

By: /s/ Florian Brand,  
Chief Executive Officer

ATAI Life Sciences AG,  
By: /s/ Florian Brand, 02/28/2022  
Chief Executive 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.**