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.

		_		OMB APPROVAL
UNI		ES AND EXCHAN ton, D.C. 20549 FORM D	GE COMMISSION	OMB 3235- Number: 0076 Estimated average
	Notice of Exem	pt Offering of Secu	rities	burden hours per response: 4.00
1. Issuer's Identity				<u> </u>
CIK (Filer ID Nu	mber) Previous Names	X None		Entity Type
0001371217			X Corporation	1
Name of Issue	er		Limited Par	
EnteroMedics Inc				bility Company
Jurisdiction of			General Pa	5 1 5
Incorporation/Orga	nization		Business Tr	rust
DELAWARE			Other (Spec	cify)
-	ation/Organization			
X Over Five Years Ago				
Within Last Five Years (Yet to Be Formed	Specity Year)			
2. Principal Place of Busines	ss and Contact Information			
	of Issuer			
EnteroMedics Inc	A 11 - 4		0	
2800 Patton Rd	Address 1		Street Address 2	
City	State/Province/Count	v ZIP/Post	talCode Phone Num	ber of Issuer
St Paul	MINNESOTA	55113	651-634-3003	
3. Related Persons				
Last Name	T.	ret Name	Middle Na	
Gladney	Dan	rst Name	Widdle Nai	lit
Street Address 1		et Address 2	**	
2800 Patton Road	540			
City	State/Pr	ovince/Country	ZIP/PostalC	ode
St. Paul	MINNESOTA	0	55113	
Relationship: X Executive	Officer X Director Prom	oter		
Clarification of Response (if	f Necessary):			
	Fi	rst Name	Middle Na	ne
Last Name	11		-	
	Scott		Р	
Last Name Youngstrom Street Address 1	Scott	et Address 2	Р	
Youngstrom	Scott	et Address 2	Р	
Youngstrom Street Address 1	Scott Stree	et Address 2 ovince/Country	P ZIP/PostalC	ode

Relationship: X Executive Officer Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name		Middle Name
Blackford Street Address 1	Gary Street Address 2	D	
2800 Patton Road	Street Address 2		
City	State/Province/Country		ZIP/PostalCode
St. Paul	MINNESOTA	55113	
Relationship: Executive Officer <i>X</i>	K Director Promoter		
Clarification of Response (if Necessa	ary):		
Last Name	First Name		Middle Name
Goldfischer	Carl		
Street Address 1	Street Address 2		
2800 Patton Road City	State/Province/Country		ZIP/PostalCode
St. Paul	MINNESOTA	55113	
Relationship: Executive Officer X			
-			
Clarification of Response (if Necessa	iry):		
Last Name	First Name		Middle Name
Griffin	Bobby	Ι	
Street Address 1 2800 Patton Road	Street Address 2		
City	State/Province/Country		ZIP/PostalCode
St. Paul	MINNESOTA	55113	
Relationship: Executive Officer <i>X</i>	C Director Promoter		
Clarification of Response (if Necessa	ary):		
Last Name	First Name		Middle Name
McDougal	Lori	С	
Street Address 1	Street Address 2		
2800 Patton Road City	State/Province/Country		ZIP/PostalCode
St. Paul	MINNESOTA	55113	
Relationship: Executive Officer λ			
Clarification of Response (if Necessa			
Last Name	First Name		Middle Name
Teti, Jr.		т	
	Nicholas	L	
Street Address 1	Street Address 2	L	
Street Address 1 2800 Patton Road		L	
2800 Patton Road City	Street Address 2 State/Province/Country		ZIP/PostalCode
2800 Patton Road City St. Paul	Street Address 2 State/Province/Country MINNESOTA	L 55113	ZIP/PostalCode
2800 Patton Road City	Street Address 2 State/Province/Country MINNESOTA		ZIP/PostalCode
2800 Patton Road City St. Paul	Street Address 2 State/Province/Country MINNESOTA & Director Promoter		ZIP/PostalCode
2800 Patton Road City St. Paul Relationship: Executive Officer X	Street Address 2 State/Province/Country MINNESOTA & Director Promoter	55113	ZIP/PostalCode Middle Name
2800 Patton Road City St. Paul Relationship: Executive Officer X Clarification of Response (if Necessa Last Name Tremmel	Street Address 2 State/Province/Country MINNESOTA Director Promoter ary): First Name Jon		
2800 Patton Road City St. Paul Relationship: Executive Officer X Clarification of Response (if Necessa Last Name Tremmel Street Address 1	Street Address 2 State/Province/Country MINNESOTA Director Promoter ary): First Name	55113	
2800 Patton Road City St. Paul Relationship: Executive Officer X Clarification of Response (if Necessa Last Name Tremmel Street Address 1 2800 Patton Road	Street Address 2 State/Province/Country MINNESOTA Director Promoter ary): First Name Jon Street Address 2	55113	Middle Name
2800 Patton Road City St. Paul Relationship: Executive Officer X Clarification of Response (if Necessa Last Name Tremmel Street Address 1	Street Address 2 State/Province/Country MINNESOTA Director Promoter ary): First Name Jon	55113	

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name		First Name		Middle Name
Ansari	Naqeeb		А	
Street Address 1		Street Address 2		
2800 Patton Road				
City		tate/Province/Country		ZIP/PostalCode
St. Paul	MINNE	SOTA	55113	
Relationship: X Executive Officer	Director	Promoter		
Clarification of Response (if Necess	ary):			
Last Name		First Name		Middle Name
DeLange	Peter		Μ	
Street Address 1		Street Address 2		
2800 Patton Road				
City	S	tate/Province/Country		ZIP/PostalCode
St. Paul	MINNE	SOTA	55113	
Relationship: X Executive Officer	Director	Promoter		
Clarification of Response (if Necess	ary):			
Last Name		First Name		Middle Name
Hickey	Paul		F	
Street Address 1		Street Address 2		
2800 Patton Road				
City	S	tate/Province/Country		ZIP/PostalCode
St. Paul	MINNE	SOTA	55113	
Relationship: X Executive Officer	Director	Promoter		
Clarification of Response (if Necess	ary):			
Last Name		First Name		Middle Name
Nihalani	Rajesh			
Street Address 1		Street Address 2		
2800 Patton Road				
City	S	tate/Province/Country		ZIP/PostalCode
St. Paul	MINNE	SOTA	55113	
Relationship: X Executive Officer	Director	Promoter		
Clarification of Response (if Necess	ary):			
4. Industry Group				
Agriculture	He	ealth Care	Retailing	
Banking & Financial Services		Biotechnology	-	
Commercial Banking		Health Insurance	Restaurants Technology	

	85	Residuidilis
Commercial Banking	Health Insurance	Technology
Insurance	Haspitals & Dhysisians	
Investing	Hospitals & Physicians	Computers
Investment Banking	Pharmaceuticals	Telecommunications
Pooled Investment Fund	X Other Health Care	Other Technology
Is the issuer registered as	Manufacturing	Travel
an investment company under	Real Estate	Airlines & Airports

the Investment Co Act of 1940?	ompany	Commercial Construction	Lodging & Conventions Tourism & Travel Services
Yes	No		
Other Banking &	Financial Services	REITS & Finance	Other Travel
Business Services		Residential	Other
Energy		Other Real Estate	
Coal Mining			
Electric Utilities			
Energy Conservation	tion		
Environmental Se	ervices		
Oil & Gas			
Other Energy			

5. Issuer Size

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

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

Investment Company	y Act Section 3(c)
Section 3(c)(1)	Section 3(c)(9)
Section 3(c)(2)	Section 3(c)(10)
Section 3(c)(3)	Section 3(c)(11)
Section 3(c)(4)	Section 3(c)(12)
Section 3(c)(5)	Section 3(c)(13)
Section 3(c)(6)	Section 3(c)(14)
Section 3(c)(7)	
	Section 3(c)(1) Section 3(c)(2) Section 3(c)(3) Section 3(c)(4) Section 3(c)(5) Section 3(c)(6)

7. Type of Filing

- X New Notice Date of First Sale 2017-05-22 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
 - Debt

Option, Warrant or Other Right to Acquire Another Security Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security Pooled Investment Fund Interests Tenant-in-Common Securities Mineral Property Securities

Other (describe)

10. Business Combination Transaction

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

Clarification of Response (if Necessary):

11. Minimum Investment

Minimum investment accepted from any outside investor \$0 USD

12. Sales Compensation

Recipient		Recipient CRD Number X None	
(Associated) Broker or Dealer X None		(Associated) Broker or Dealer CRD Number X None	·
Street Address 1		Street Address 2	
City	2	State/Province/Country	ZIP/Postal Code
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	All States	Foreign/non-US	

13. Offering and Sales Amounts

Total Offering Amount	\$31,291,494 USD or	Indefinite
Total Amount Sold	\$31,291,494 USD	
Total Remaining to be Sold	\$0 USD or	Indefinite

Clarification of Response (if Necessary):

Represents the value of the Issuer's common shares issued in connection with the merger of BarioSurg, Inc., based on the last reported sale price of the Issuer's common shares on NASDAQ Stock Exchange on May 22, 2017 and \$2 Million additional cash.

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:

1	
41	

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 Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) 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
EnteroMedics Inc	/s/ Scott P. Youngstrom	Scott P. Youngstrom	CFO and Chief Compliance Officer	2017-06-02

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.