FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APP	ROVAL						
	OMB Number:	3235-0287						
	Estimated average burden							
- 1	hours nor roomanas	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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>Trojanowski Justin</u>					2. Issuer Name and Ticker or Trading Symbol Tempest Therapeutics, Inc. [ TPST ]							Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  10% Owner  Officer (c) a title  Officer (c) a titl					
(Last) C/O TEN	•	irst) ERAPEUTICS, I	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/03/2024							X Officer (give title Other (specify below)  Principal Accounting Officer				
2000 SIERRA POINT PARKWAY, SUITE 400				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) BRISBA	NE C	A	94005										_	led by More	Reporting Pers		
(City) (State) (Zip)				Rı	Rule 10b5-1(c) Transaction Indication												
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										ed to							
		Tab	le I - Non	-Deriv	ativ	Sec	urities	s Ac	quired, Di	sposed o	f, or Be	neficiall	y Owned				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date		Date,	e, Transaction Disposed Code (Instr. 5)		rities Acquired (A) or ad Of (D) (Instr. 3, 4 and		Beneficia	es Fo ally (D Following (I)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V			Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)		(IIISti. 4)				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	ate, T	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (right to buy)	\$4.66	01/03/2024			A		26,500		(1)	01/02/2034	Common Stock	26,500	\$0.00	26,500	D		

## Explanation of Responses:

1. These stock options vest in a series of 48 equal monthly installments measured from January 3, 2024, subject to the Reporting Person's continued service.

## Remarks:

/s/ Nicholas Maestas, Attorneyin-Fact 01/05/2024

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (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.