FORM 4

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

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							

0.5

hours per response:

OMB Number: STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Estimated average burden

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

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1. Name and Address of Reporting Person* <u>Epstein David R</u>				2. Issuer Name <b>and</b> Ticker or Trading Symbol Tempus AI, Inc. [ TEM ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u> </u>										_	<b></b> Dir€	ector		10% O	wner		
(Last)	(Fi	rst) (ľ	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/13/2024							Offi belo	cer (give title ow)		Other ( below)	
C/O TEMPUS AI, INC.				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable						
<i>'</i>				4. If Amendment, Date of Original Filed (Month/Day/Year)						Li Li							
600 WEST CHICAGO AVENUE, SUITE 510				1								For	m filed by On	e Repo	ortina Pers	on	
(Street)														m filed by Mo		Ü	
CHICAC	GO IL	6	60654		-												
					Rule 10b5-1(c) Transaction Indication												
(City)	(St	ate) (2	Zip)		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.												
		Table	l - Noi	n-Deriva	tive S	ecur	ities Acq	uired,	Dis	oosed of	, or Be	nefici	ally Ow	ned			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day			Execution Date,		Transaction Disposed (Code (Instr. 5)		ies Acquired (A) Of (D) (Instr. 3,		4 and Securities Beneficially Owned Follow		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
						Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Class A Common Stock 06/13/2				2024			A		28,514(1)	) A	\$	0 28,514			D		
		Tal					ies Acqu varrants,							ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, Day/Year)	4. Transac Code (li 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4	6. Date Expirati (Month/	ion Da		7. Title a Amount Securiti Underly Derivati Security 3 and 4)	of es ng re	8. Price o Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownershi (Instr. 4)

## **Explanation of Responses:**

1. Consists of previously granted restricted stock units ("RSUs") for which the liquidity event-based condition was satisfied upon the effectiveness of the registration statement on Form S-1 filed by the Issuer in connection with the Issuer's initial public offering, as well as, a grant of RSUs made in connection with the Issuer's Non-Employee Director Compensation Policy. Certain of the RSUs remain subject to service-based vesting conditions, as follows: (i) 14,000 RSUs vest in 14 equal quarterly installments commencing on August 5, 2024 and (ii) 13,514 RSUs vest in 20 substantially equal quarterly installments commencing on September 13, 2024.

Date

Exercisable

and 5)

(A) (D)

/s/ Erik Phelps, Attorney-in-

Amount or Number

Shares

Title

**Fact** 

Expiration Date

\*\* Signature of Reporting Person

Date

06/17/2024

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 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).

Code

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.