FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Vashington,	D.C.	20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average burden											
hours per response:	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

Name and Address of Reporting Person*     Quigley Jill M.					<u>Ter</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol Terns Pharmaceuticals, Inc. [ TERN ]							(Ch	elationship eck all appli X Directo	,			
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/12/2023								Officer below)	(give title		ther (s low)	pecify
C/O TERNS PHARMACEUTICALS, INC. 1065 EAST HILLSDALE BLVD., SUITE 100				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
(Street)	R CITY C	A	94404											Form f Persor	iled by More	than One	Repor	ting
(City)	(S	itate)	(Zip)			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.										d to		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  1. Title of Security (Instr. 3)  2. Transaction 2. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership 7. Nature												'. Nature						
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Date,			, Transaction Dispose Code (Instr. 5)		ed Of (D) (Instr. 3, 4 an		Securiti Benefici Owned	es For ally (D) Following (I) (	Form: Dire (D) or Indii (I) (Instr. 4)	ect E	of Indirect Beneficial Ownership	
									Code	v	Amount	nt (A) or Pr		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
		Т							uired, Dis , options					Owned				
Derivative Conversion Date Execution Date, T Security or Exercise (Month/Day/Year) if any				ransaction of ode (Instr. Derivative			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)	Own Form Direct or In (I) (Ir		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V (A) (D) Exerci				Date Exercisable	Exp	or Nun of		Number					
Stock Option (Right to Buy)	\$12.05	06/12/2023			A		32,000		(1)	06/1	11/2033	Common Stock	32,000	\$0.00	32,000		)	

## **Explanation of Responses:**

1. The option will vest in full on the earlier of (i) the first anniversary of the date of grant and (ii) immediately prior to the Annual Meeting following the date of grant.

## Remarks:

/s/ Bryan Yoon as Attorney-in-Fact for Jill M. Quigley

06/14/2023

\*\* 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.