

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
OMB Number:	3235-0104
Estimated average burden hours per response:	0.5

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>Point72 Private Investments, LLC</u>  (Last) (First) (Middle) 72 CUMMINGS POINT ROAD  (Street) STAMFORD CT 06902  (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 11/22/2022	3. Issuer Name and Ticker or Trading Symbol <u>Tempo Automation Holdings, Inc.</u> [ <b>TMPO</b> ]	
		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)
Common Stock, par value \$0.0001 per share	5,351,000	I	See footnotes <sup>(1)(2)</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>Point72 Private Investments, LLC</u>  (Last) (First) (Middle) 72 CUMMINGS POINT ROAD  (Street) STAMFORD CT 06902  (City) (State) (Zip)
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1. Name and Address of Reporting Person* <u>COHEN STEVEN A/SAC CAPITAL MGMT LP</u>  (Last) (First) (Middle) C/O SAC CAPITAL ADVISORS LLC 72 CUMMINGS POINT ROAD  (Street) STAMFORD CT 06902  (City) (State) (Zip)
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**Explanation of Responses:**

1. The securities reported herein are held by Point72 Ventures Investments, LLC ("Point72 Ventures Investments"). Point72 Private Investments, LLC ("Point72 Private

Investments") is the managing member of Point72 Ventures Partners, LLC, the sole member of Point72 Ventures Investments, and exercises voting and dispositive power over the shares held by Point72 Ventures Investments. Point72 Capital Advisors, Inc. is the general partner of Point72, L.P., the sole member of Point72 Private Investments. Steven A. Cohen ("Mr. Cohen", and each of Mr. Cohen and Point72 Private Investments, a "Reporting Person" and, together, the "Reporting Persons") is the sole stockholder and director of Point72 Capital Advisors, Inc. and may be deemed to share voting and dispositive power over the shares held by Point72 Ventures Investments.

2. The filing of this statement shall not be deemed an admission that either Reporting Person is the beneficial owner of the securities reported herein for purposes of Section 16 of the Securities Act of 1934, as amended, or otherwise. Each Reporting Person expressly disclaims beneficial ownership of the securities reported herein except to the extent of its or his pecuniary interest therein.

<u>Point72 Private</u> <u>Investments, LLC /s/</u> <u>David Schaffer,</u> <u>Authorized Person</u> <u>/s/ Steven A. Cohen</u>	<u>12/05/2022</u> <u>12/05/2022</u>
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** Signature of Reporting Person	Date
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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.**