FORM 4

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

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287
Estimated average burden	
hours per response:	0.5

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 4065.140.5 Descriptions

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1005-1(C). See II	istruction to.			
Name and Address of Reporting Person*     Guerrero Ramiro		son <sup>*</sup>	2. Issuer Name and Ticker or Trading Symbol  MAIA Biotechnology, Inc. [ MAIA ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner
(Last) 444 WEST LAI	(First) KE STREET, SUI	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/13/2024	Officer (give title Other (specify below)
(Street) CHICAGO (City)	IL (State)	60606 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (li 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount (A) or (D) Price			Transaction(s) (Instr. 3 and 4)		
Common Stock	12/13/2024		P		53,418(1)	A	\$1.872	514,970	D	

# 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)	4. Transac Code (Ir 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		te	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	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Warrants	\$2.08	12/13/2024		Р		53,418		06/13/2025 <sup>(2)</sup>	06/13/2030	Common Stock	53,418	\$2.08	53,418	D	

## Explanation of Responses:

- 1. The common stock was purchased pursuant to a Securities Purchase Agreement and were issued under the Issuer's 2021 Equity Incentive Plan on December 13, 2024.
- 2. These warrants were purchased pursuant to a Securities Purchase Agreement and were deemed options issued under the Issuer's 2021 Equity Incentive Plan on December 13, 2024. The options are exercisable beginning on the six month anniversary of the issuance date and expire 5-years after the initial exercise date.

/s/ Ramiro Guerrero

12/13/2024

\*\* Signature of Reporting Person

Date

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).

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.