FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

vvasiliilgion,	D.C. 20049	

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).

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

OMB APPROVAL									
OMB Number:	3235-0287								
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Name and Address of Reporting Person* Polar Asset Management Partners Inc.					2. Issuer Name and Ticker or Trading Symbol GigCapital5, Inc. [GIA]									tionship all app Direc	,	ng Per	. ,			
(Last)	(Fir	st) (I SUITE 2900	Middle))		3. Date of Earliest Transaction (Month/Day/Year) 02/28/2023									Office below	er (give title		Other (below)	specify	
(Street) TORON (City)			M5J 01 Zip)	E6	4. If <i>i</i>	Amend	ment, Dat	e of C	of Original Filed (Month/Day/Year)						dividual or Joint/Group Filing (Check Applicable) (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 2. Transaction 2. Transaction 2. Transaction 2. Transaction 2. Transaction 3.																				
Date (Month/Day/					Execution Date,		Transaction Code (Instr. 8) Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a)				and 5) Securitie Beneficia Owned F		ties cially I Following	Form (D) o	n: Direct	of Indirect Beneficial Ownership				
								Co	de	v	Amount	(A) or (D)	Price			ction(s) 3 and 4)			(Instr. 4)	
Common Stock, par value \$0.0001 per share				02/28/20)23			:	5		80,000	D	\$10	0.45 1,4		467,620		I	See footnote 1 ⁽¹⁾	
Common Stock, par value \$0.0001 per share				02/28/20)23			5			15,400	D	\$10.	4014	1,452,220			I	See Footnote 1 ⁽¹⁾	
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)	Execu	eemed ution Date, th/Day/Year)		saction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e (f	Expiration I (Month/Day		ate	7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		Der Sec (Ins	rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A) (D		ate xerc	isable	Expiration Date		Amoun or Numbe of Shares	r						

Explanation of Responses:

1. Polar Asset Management Partners Inc., a company incorporated under the laws of Ontario, Canada (the "Reporting Person"), serves as investment advisor to Polar Multi-Strategy Master Fund, a Cayman Islands exempted company ("PMSMF") and has sole voting and investment discretion with respect to the securities reported herein which are held by PMSMF. The Reporting Person disclaims beneficial ownership of the securities reported herein, and this report shall not be deemed an admission that Reporting Person is the beneficial owner of the securities reported herein for the purpose of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose, except to the extent of Reporting Person's pecuniary interest therein.

> /s/ Andrew Ma, Chief Compliance Officer, on behalf 03/02/2023 of Polar Asset Management Partners Inc.

** 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.