Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| | | 00540 |
|-------------|------|-------|
| Vashington, | D.C. | 20549 |

| STATEMENT O | F CHANGES II | N BENEFICIAL | OWNERSHIP |
|-------------|--------------|--------------|------------------|
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| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | | |
| hours per response | e: 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

| Name and Address of Reporting Person* Wylie Scott C | | | | | | 2. Issuer Name and Ticker or Trading Symbol First Western Financial Inc [MYFW] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------------------------|----------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------------------------------------------------|---|------------------------------------------------------------------------|------------------------------|---------------------------------------------------------------------------------|-----------------------------------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------|------|------------------------------------------|--|
| (Last) | (Fir | st) (M | Midd | lle) | 3. Date of Earliest Transaction (Month/Day/Year) 11/20/2023 | | | | | | | X Officer (give title below) Other (specify below) CHAIRMAN, CEO AND PRESIDENT | | | | | | | | | |
| (Street) DENVE | R CC |) 8 | 020 |)2 | 4. If | 4. If Amendment, Date of Original Filed (Month. | | | | | | d (Month/D | ay/Yea | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | |
| (City) | (Sta | ate) (Z | Zip) | | Ru | Rule 10b5-1(c) Transaction Indication | | | | | | | Person | | | | | | | | |
| | 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. | | | | | | | | | | ded to | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| Date | | | 2. Transaction Date (Month/Day/Ye | 2A. Deeme Execution if any (Month/Da | | n Date, Tr | | Transaction Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an 5) | | | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | C | ode | v | | | (A) or (D) | Price | Transaction (Instr. 3 au | | | | (IIISII. | 4) | | |
| Common | Common Stock 11/20/2023 | | | 3 | | | | F | | | 657 | D | \$16.54 | 768,257 | | D | | | | | |
| Common | Stock | | | 11/20/202 | 3 | | | | A | | 6, | ,521(1) | A | \$0 | 774,778 | | D | | | | |
| Common | Stock | | | 11/20/202 | 3 | | | | F | | 1 | 1,874 | D | \$16.54 | 772,9 | 904 | D | | | | |
| Common | Stock | | | | | | | | | | | | | | 2,000 I Fai | | | | Fami | Wylie mily undation ⁽²⁾ | |
| 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) | Execution Date, if any (Month/Day/Year) Transaction Code (Instr. See Active (A) Distriction of (Instr. See Active (A) Distriction (Instr. See Active (Instr. | | | | of Deriv Secu Acqu (A) o Dispo | f Expiration Date (Month/Day/Year) ecurities cquired A) or isposed f (D) nstr. 3, 4 | | | Amo Secu Unde Deriv | ele and unt of irities erlying vative irity (Instr. d 4) | 8. Price of Derivative Security (Instr. 5) | deriva Secur Benef Owne Follow Repor Trans | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | rship i (D) lirect str. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code V (A) (D | | | (D) | | ate kercisab | | | Title | Amount or Number of Shares | | | | | | | |

Explanation of Responses:

- 1. Represents performance stock units granted on November 18, 2020. The performance conditions were satisfied and 50% of performance stock units vested on November 18, 2023.
- 2. The reporting person serves as President and Trustee of the Wylie Family Foundation. The reporting person disclaims beneficial ownership of these securities except to the extent of his pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of all of the reported shares for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose.

Remarks:

/s/ Julie A. Courkamp, Attorney-in-Fact

11/22/2023

** 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.