FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPR	OVAL
OMB Number:	3235-0287
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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 10b5-1(c)

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

See Ins	struction 10.																		
Name and Address of Reporting Person* Chang William H				2. Issuer Name and Ticker or Trading Symbol Semler Scientific, Inc. [SMLR]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Chang william 11													Directo			10% Ov	· I		
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 01/06/2025							Officer (give title Other (specify below) below)								
C/O SEMLER SCIENTIFIC, INC.			"	37,30,202															
2340-2348 WALSH AVENUE, SUITE 2344			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)													Form filed by One Reporting Person						
SANTA CLARA CA 95051													Form filed by More than One Reporting Person						
(City)	(St	tate)	(Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transar Date (Month/Di			Execution Date,		Code (Instr. 5)			4 and Secu Bend Own			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership						
					Code	v	Amount	(A) (D)	Price	Tr	eported ransact nstr. 3 a				(Instr. 4)				
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)	rivative Conversion Date Execution Date, Tracurity or Exercise (Month/Day/Year) if any Co		Transad Code (I	insaction of			Expiration Date (Month/Day/Year) Amou Secur Under Deriva			Amount of Securities Underlying Derivative	7. Title and Amount of Securities Juderlying Jerivative Security Instr. 3 and 4)		ice of vative ırity r. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	i Ily	Ownershij Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable		opiration	Title	Amoun or Numbe of Shares						
Stock Option (right to buy)	\$58.94	01/06/2025			A		7,125		(1)	01	/06/2035	Common Stock	7,125	\$	\$0	7,125		D	
Stock Option (right to buy)	\$58.94	01/06/2025			A		1,000		(2)	01	/29/2027	Common Stock	1,000	\$	§0	1,000		D	

Explanation of Responses:

- 1. The shares underlying the option shall vest and become exercisable as follows: 1/12th of the underlying shares shall vest on the grant date, following which 1/12th of the underlying shares shall vest on a monthly basis thereafter such that all of the underlying shares shall be vested on the first anniversary of the grant date.
- 2. The shares underlying the option shall vest and become exercisable as follows: 1/24th of the underlying shares shall vest on the grant date, following which 1/24th of the underlying shares shall vest on a monthly basis thereafter such that all of the underlying shares shall be vested on the second anniversary of the grant date.

/s/ Renae Cormier, attorney-in-01/07/2025

fact

** 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.