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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	iuc. occ		Filed	pursua or Se	ection 3	ection 80(h) o	16(a) of the Ir	of the Se ovestmen	ecuriti nt Con	es Exchang npany Act o	e Act of f 1940	f 1934			nours	per re	esponse:	0.5
1. Name and Address of Reporting Person* <u>LEIBOWITZ ARTHUR N</u>				2. Issuer Name <b>and</b> Ticker or Trading Symbol Semler Scientific, Inc. [ SMLR ]									all app	nship of Reportin I applicable) Director		10% O	wner		
(Last) (First) (Middle) C/O SEMLER SCIENTIFIC, INC. 2340-2348 WALSH AVENUE, SUITE 2344					3. Date of Earliest Transaction (Month/Day/Year) 01/21/2022									Officer (give title below)			Other ( below)	specify	
(Street) SANTA CLARA (City)	CA (St		5051 Zip)		4. If A	Amend	ment,	Date o	f Original	l Filed	l (Month/Da	y/Year)		6. Indiv Line) X	Form	filed by On	e Rep	ng (Check A porting Pers an One Rep	on
			I - Nor			1			<del></del>	Dis	oosed of							1	
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execution D		Date,	Code (Ins						5. Amount of Securities Beneficially Owned Following		Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) (D)	or Pri	се	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 01/21				2022	2022 A 1,340 A				\$ <mark>0</mark>	2,429			D						
		Tal									osed of, o				Owned	d			
1. Title of Derivative Security (Instr. 3)			on Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Deri Sec (Ins	vative urity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amoun or Numbe of Shares	r					

**Explanation of Responses:** 

/s/ Daniel E. Conger, attorney-01/26/2022 in-fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.