SEC For	m 4																			
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549														OMB APPROVAL					
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).				STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP 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 Number: 3235-0 Estimated average burden hours per response:		
1. Name and Address of Reporting Person [*] Carlson Peter M						2. Issuer Name and Ticker or Trading Symbol <u>Spectral AI, Inc.</u> [MDAI]									Relationship o eck all applio X Directo	cable)	Reporting Perso ble)		suer wner	
(Last) (First) (Middle) 2515 MCKINNEY AVE, SUITE 1000						below)										(give title Other (specify below)				
(Street) DALLAS, TX 75201					_ 4.	Line									ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(5		(Zip)	-Deriv		Chec satisf	k this b fy the a	oox to ii ffirmati	c) Trans	ransa nditio	action was ns of Rule	made p 10b5-1	ursuant c). See	Instructio	n 10.		plan th	nat is intende	d to	
Table I - Non-Deriv. 1. Title of Security (Instr. 3) 2. Transa Date (Month/D				saction	n 2 Eear) i	A. Dee Executi f any Month	emed ion Dat	e, Transaction Code (Instr. 5)		rities Acquired (A) or ed Of (D) (Instr. 3, 4 and		5. Amou Securitie Beneficia Owned F	nt of es ally Following	Forn (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amoun	Amount (A) or (D) P		Price	Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)	
Common Stock 05/10/				0/202	2024			Α		29,4			(1) 29	9,411		D				
		-							quired, D ts, option						Owned					
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. Transaction Code (Instr. 8)				6. Date Exer Expiration I (Month/Day/		7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s illy g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownershi (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable		piration ate	Title	or N	mount r umber f Shares						
Restricted Stock Unit	\$0								(2)	01	/03/2024	Comm Stoc		50,000		150,00	00	D		
Restricted Stock Unit	\$0								(3)	02	2/29/2024	Comm Stoc		50,000		150,00	00	D		

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$1.69 to \$1.78 inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote

2. 50% of RSUs vest on a time-based vesting schedule with 33% of the RSUs vesting on 1/3/2025, 33% vest on 1/3/2026, and the remainder vest on 1/3/2027. The remainder vest pursuant to certain performance-based metrics.

3. 50% of RSUs vest on a time-based vesting schedule with 33% of the RSUs vesting on 2/28/2025, 33% vest on 2/28/2026, and the remainder vest on 2/28/2027. The remainder vest pursuant to certain performance-based metrics.

/s/ Peter Carlson	05/13/2024				
** Signature of Reporting Person	Date				

** Signature of Reporting Person

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.