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**

Washington, I	D.C. 20549
---------------	------------

STATEMENT OF CHAN	IGES IN BENEFICIA	L OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-0287
Estimated average	burden
hours per response	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

1. Name and Address of Reporting Person*  Mehlman Bruce				Issuer Name and Ticker or Trading Symbol     iLearningEngines, Inc. [ AILE ]      Date of Earliest Transaction (Month/Day/Year)								heck all a	nip of Reportion policable) ector cer (give title	ng Pe	rson(s) to Is  10% Ov  Other (s	vner			
(Last)	(Fi	rst) (M	Middle)			04/16/2024									ow)		below)	specify	
C/O ILEARNINGENGINES, INC.				4. If /	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable							
6701 DEMOCRACY BLVD., SUITE 300												Line)  X Form filed by One Reporting Person							
(Street) BETHES	(Street) BETHESDA MD 20817													Form filed by More than One Reporting Person					
-					Ru	Rule 10b5-1(c) Transaction Indication													
(City)	(Si	ate) (Z	te) (Zip)				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.									nded to			
		Table	I - No	on-Deriva	tive \$	Secui	rities	Acc	quired	l, Dis	posed of	, or	Bene	ficia	ally Ow	ned			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/				Executi (Year) if any		eemed ution Date, h/Day/Year)					Acquired (A) of (D) (Instr. 3, 4			1 5) Sec Ben Owi	5. Amount of Securities Beneficially Owned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)		Price	Trai	orted saction(s) r. 3 and 4)			(Instr. 4)	
Common	Stock			04/16/2	024			A		1,323,291	(1) <b>A</b>		(2)	) 1	1,323,291		D		
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 if any	eemed Ition Date, h/Day/Year)		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 (Inst 3 and 4)			8. Price of Derivative Security (Instr. 5)		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	or Nun of	.					

## **Explanation of Responses:**

- 1. Received pursuant to the Agreement and Plan of Merger and Reorganization, dated as of April 27, 2023, by and among the Issuer, ARAC Merger Sub, Inc., a wholly-owned subsidiary of the Issuer ("Merger Sub") and iLearningEngines Holdings, Inc. ("Legacy iLearningEngines"), whereby Merger Sub merged with and into Legacy iLearningEngines with the separate corporate existence of Merger Sub ceasing and Legacy iLearningEngines continuing as the surviving corporation and a wholly-owned subsidiary of Issuer (the "Merger").
- 2. Received in exchange for 1,641,500 shares of Common Stock of Legacy iLearningEngines in connection with the Merger (as described in footnote 1).

By /s/ David Samuels, 04/18/2024 Attorney-in-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.