

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
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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* <u>GREENOAKS CAPITAL PARTNERS LLC</u> <hr/> (Last) (First) (Middle) 535 PACIFIC AVENUE 4TH FLOOR <hr/> (Street) SAN FRANCISCO CA 94133 <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 01/07/2021	3. Issuer Name and Ticker or Trading Symbol <u>CLOVER HEALTH INVESTMENTS, CORP. /DE [ CLOV ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line) <input type="checkbox"/> Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Class B Common Stock	(I)	(I)	Class A Common Stock	96,331,338	(I)	I	See footnote <sup>(2)</sup>

1. Name and Address of Reporting Person\*  
GREENOAKS CAPITAL PARTNERS LLC  


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 (Last) (First) (Middle)  
 535 PACIFIC AVENUE  
 4TH FLOOR  


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 (Street)  
 SAN FRANCISCO CA 94133  


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 (City) (State) (Zip)

1. Name and Address of Reporting Person\*  
MEHTA NEIL  


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 (Last) (First) (Middle)  
 535 PACIFIC AVENUE  
 4TH FLOOR  


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 (Street)  
 SAN FRANCISCO CA 94133  


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 (City) (State) (Zip)

(City)	(State)	(Zip)
1. Name and Address of Reporting Person*		
<a href="#">PERETZ BENJAMIN</a>		
(Last)	(First)	(Middle)
535 PACIFIC AVENUE		
4TH FLOOR		
(Street)		
SAN FRANCISCO	CA	94133
(City)	(State)	(Zip)

**Explanation of Responses:**

1. Each share of Class B Common Stock is convertible at any time at the option of the holder into one share of Class A Common Stock. All shares of Class B Common Stock will automatically convert into shares of Class A Common Stock upon the occurrence of certain events set forth in the Issuer's certificate of incorporation which are described in the Schedule 14A filed by the Issuer with the Securities and Exchange Commission on December 14, 2020. Subject to such automatic conversion, the shares of Class B Common Stock have no expiration date.

2. The securities reported herein are held by certain funds and accounts to which Greenoaks Capital Partners LLC ("Greenoaks Capital") serves as the investment adviser. Neil Mehta and Benjamin Peretz serve as Managing Directors of Greenoaks Capital.

**Remarks:**

Each Reporting Person disclaims beneficial ownership in the securities reported on this Form 3 except to the extent of its or his pecuniary interest, if any, therein, and this report shall not be deemed to be an admission that such Reporting Person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

<a href="#">Greenoaks Capital Partners LLC, By: /s/ Neil Mehta, Managing Director</a>	<a href="#">01/19/2021</a>
<a href="#">/s/ Neil Mehta</a>	<a href="#">01/19/2021</a>
<a href="#">/s/ Benjamin Peretz</a>	<a href="#">01/19/2021</a>
** 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 5 (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.**