FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287

Estimated average burden	
hours per response:	0.5

to Section 16.	Form 4 or Form 5 ay continue. See	5	d pursuant to Section 16(a) of the Securities Exchange Act of 19 or Section 30(h) of the Investment Company Act of 1940	34	Estimated av hours per res	erage burden sponse: 0.5		
Sharp Aric (Last) C/O CLOVER	. Name and Address of Reporting Person [*] Sharp Aric R (Last) (First) (Middle) C/O CLOVER HEALTH INVESTMENTS, CORP. 3401 MALLORY LANE, SUITE 210		2. Issuer Name and Ticker or Trading Symbol CLOVER HEALTH INVESTMENTS, CORP. /DE [CLOV] 3. Date of Earliest Transaction (Month/Day/Year) 05/09/2022	(Check all applic Director X Officer below)	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) CEO of Value Based Care			
(Street) FRANKLIN (City)	TN (State)	37067 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line) X Form fil	ed by One Repo ed by More thar	g (Check Applicable orting Person n One Reporting		
		Table I - Non-Deriva	ative Securities Acquired. Disposed of. or Ben	eficially Owned	d			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	3. Transa Code (8)	ction				Beneficially	Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130. 4)
Class A Common Stock	05/09/2022	A		370,967(1)	Α	\$ <mark>0</mark>	370,967	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents shares of Class A common stock underlying a time-based restricted stock unit award ("RSUs"). Twenty-five percent of the RSUs will vest on the first anniversary of May 9, 2022, and the remaining RSUs will vest in twelve equal quarterly installments beginning on the date that is three months after the first anniversary of May 9, 2022, in each case subject to the continued service of the Reporting Person on each such vesting date.

Remarks:

/s/ Joseph R. Martin, as Attorney-in-Fact

05/10/2022

** 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.