FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vachinaton	D.C	20540	
Vashington,	D.C.	20549	

STATEMENT C	F CHANGES	IN BENEFICIAL	OWNERSHIP

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

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Garipalli Vivek				2. Issuer Name and Ticker or Trading Symbol CLOVER HEALTH INVESTMENTS,							Relationship of Reporting Person(s) to Issuer (Check all applicable)								
<u> </u>	<u>ii vivek</u>						OE [CLO				,		X	Director		X	10% Ov	vner	
(Last)	(F	First)	(Middle)										X	Officer (g below)	jive title		Other (s	specify	
C/O CLO	OVER HEA	LTH INVESTM	ENTS, COR				ırliest Trans	action (Mo	nth/D	ay/Year)				Chief Executive Officer					
3401 MALLORY LANE, SUITE 210					01/07/2022														
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Indi	6. Individual or Joint/Group Filing (Check Applicable								
FRANKI	LIN T	N	37067							X		Form filed by One Reporting Person							
(City)	(9	State)	(Zip)											Form file	d by More	e than (One Report	ing Person	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date		2. Transac Date (Month/Da	Execution Date,		Code (Transaction Code (Instr. 3, 4 a					Form: Directly (D) or Indirect		ct Indirect ect Beneficial						
						Code	v	Amount	(A) or D)	Price	Transactio (Instr. 3 an				(iiisti. 4)			
Class B Common Stock 01/07			01/07/2	/2022		M		3,342,698 A		(1)	3,342,698		D						
Class B Common Stock 01/07/			01/07/2	2022			F 1,664,825 D \$		\$3.16	1,677,873			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) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year)		Code	saction Derivative		Expiration	Expiration Date Securities (Month/Day/Year) Derivative		Title and Amount of ecurities Underlying erivative Security nstr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	re es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
				Code	· v	Date Expiration Nun		nount or mber of ares	(Instr. 4)										
Restricted Stock Unit	(1)	01/07/2022		М			3,342,698	(2)		(2)	Class Comm	on 3,	342,698	\$0	13,370	,793	D		

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of the Issuer's Class B Common Stock upon settlement for no consideration.
- 2. On January 7, 2021, the Reporting Person was granted 16,713,491 RSUs, vesting in equal annual installments over five years, beginning on January 7, 2022, subject to the continuous service of the Reporting Person as CEO, Co-CEO or Executive Chairman of the Issuer through each vesting date. Shares of the Issuer's Class B common stock will be delivered to the Reporting Person upon vesting.
- 3. The Class B Common Stock will be convertible into shares of Class A Common Stock on a one-to-one basis at the option of the holders of the Class B Common Stock at any time upon written notice to the Issuer.

Remarks:

/s/ Gia Lee, as Attorney-in-Fact 01/11/2022

** 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.