FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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

OMB APPROVAL								
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* Reynoso Jamie L.				2. Issuer Name and Ticker or Trading Symbol CLOVER HEALTH INVESTMENTS, CORP. /DE [CLOV]									neck all app Direc	licable)	ng Person(s) to Is 10% Ov Other (s		wner		
(Last)	(Fii	est) (M	Middle)	, CORP.	3. Date of Earliest Transaction (Month/Day/Year) 12/14/2023									^ below	below) Chief Operat		below)		
3401 MALLORY LANE, SUITE 210				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)	LIN TN	J 3	7067												X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (Ž	Zip)		Rule 10b5-1(c) Transaction I						tion Indi	icat	ion						
						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.													
		Table	I - No	n-Deriva	tive \$	Secu	rities	Acq	uired,	Dis	posed of	, or	Ben	eficia	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Executy/Year) if any		Deemed cution Date, ny nth/Day/Year)		3. 4. Securitie Disposed Code (Instr. 8)						d Securi Benefi Owned	Amount of curities neficially ned Following		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount		A) or D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Class A Common Stock 12/			12/14/2	2023			F		12,567(1	12,567 ⁽¹⁾ D		\$1	2,538,516			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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any			Transaction Code (Instr. 8) Se Ad Di of		osed) r. 3, 4	Expiration Da		ite	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		; j	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nur of	ount mber ires					

Explanation of Responses:

1. Represents shares of Class A Common Stock that were automatically withheld to cover tax obligations upon the vesting, on December 14, 2023, of 6.25% of the original number of time-based restricted stock units ("RSUs") granted to the Reporting Person on March 14, 2022, and timely reported on a Form 4 filed on March 16, 2022. The remaining RSUs vest quarterly in equal installments of 6.25%, with the final vesting date occurring on March 14, 2026, subject to the continued service of the Reporting Person on each such vesting date.

Remarks:

/s /Scott Leffler, as attorneyin-fact for Jamie L. Reynoso

12/18/2023

** 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.