FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington.	D.C.	20549

STATEMENT	OF CHANGE	S IN BENEF	ICIAL OW	NERSHIP

OMB APPROVAL							
OMB Number: 3235-028							
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Check this box if no longer subject to 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

	nd Address of	Reporting Person*				r Name an		ker or Trading	g Symbol			k all applical		g Perso	n(s) to Issue	
(Last)	(F ARECARE,	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/08/2023					X	below)		hairma	Other (sp below) an and CEO	´	
255 E. PACES FERRY RD. NE SUITE 700				4. If Amendment, Date of Original Filed (Month/Day/Year)				6. Ind Line)	Individual or Joint/Group Filing (Check Applicable Line)							
(Street)	ΓA G	A	30305								X		,		ting Person One Reportir	ng Person
(City)	(S	itate)	(Zip)	F	Rule 10b5-1(c) Transaction Indication 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.								atisfy the			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
Date				2A. Deemed Execution Date if any (Month/Day/Yea		e, Transaction Disposed Of (I Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 and 5)		Securities For Beneficially (D) Owned Following (I)		Form:	Direct Ir Indirect B str. 4)	Nature of direct eneficial wnership		
								Code	/ Amount	(A) (D)	Price	Price Reported Transaction(s) (Instr. 3 and 4)			nstr. 4)	
	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. Transaction Code (Instr. 8)		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 (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code			Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)				
Restricted Stock Units	(1)	11/08/2023		A		4,604,357		(2)	(2)	Common Stock	4,604,357	\$0	4,604,	,357	D	

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of common stock, par value \$0.0001 per share ("Common Stock"), of Sharecare, Inc. (the "Company"), or as determined by the administrator, cash equal to the fair market value of one share of Common Stock on the settlement date.
- 2. One-twelfth (1/12) of the RSUs will vest quarterly on February 15, May 15, August 15 and November 15 of each of 2024, 2025, and 2026, provided that Reporting Person is still employed by the Company or an affiliate thereof through the applicable vesting dates; provided, however, that 100% of Reporting Person's unvested RSUs will accelerate in the event of Reporting Person's termination without cause or resignation for good reason (in each case, as defined in Reporting Person's employment agreement).

Remarks:

/s/ Christie J. Miller, Attorneyin-Fact for Reporting Person

11/13/2023

** 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.