

(Print or Type Responses)

1. Name and Address of Reporting Person*

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden				
nours per response	e 0.5			

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

3. Issuer Name and Ticker or Trading Symbol

2. Date of Event Requiring

Summers Lawrence Henry	Statement (Month/Day/ Year)		ıy/ Y ear)	Skillsoft Corp. [SKIL]				
(Last) (First) (Middle) C/O SKILLSOFT CORP., 300 INNOVATIVE WAY #201	06/11/2021			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner		Filed(Mon	5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) NASHUA, NH 03062				Officer (give title below)		6. Individ Applicable I _X_ Form fi	ual or Joint/Group Filing(Check .ine) led by One Reporting Person ed by More than One Reporting Person	
(City) (State) (Zip)	Table I - Non-Derivative Securities Beneficially Owned							
1.Title of Security (Instr. 4)		Ber	Amount of Sec neficially Own str. 4)	ned		4. Nature of Indire (Instr. 5)	ct Beneficial Ownership	
Reminder: Report on a separate line for each class Persons who respounless the form dis Table II - Derivati	nd to the col plays a curre	lection o	f informatio d OMB cont	n contained in t rol number.		·		
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year)		Date	3. Title and Amount of Securities Underlying De Security (Instr. 4)		vative 4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable D	xpiration Date	Title Amoun	t or Number of	Security	(D) or Indirect (I) (Instr. 5)		

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Summers Lawrence Henry C/O SKILLSOFT CORP. 300 INNOVATIVE WAY #201 NASHUA, NH 03062	X				

Signatures

/s/ Lawrence H. Summers	06/14/2021
**Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- * 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.