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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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1	Check this box if no longer subject to
L	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
1	may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

affirmative defense 10b5-1(c). See Inst		•		
1. Name and Address <u>WALKER RIC</u>		erson*	2. Issuer Name and Ticker or Trading Symbol Skillsoft Corp. [SKIL]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner
(Last) C/O SKILLSOFT	(First) CORP.	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/01/2024	X Officer (give title Other (specify below) below) CHIEF FINANCIAL OFFICER
7887 E. BELLEV	TEW AVE, S	UITE 600	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person
GREENWOOD VILLAGE	СО	80111		Form lifed by more train one reporting Person
(City)	(State)	(Zip)	Device the Occurrities Associated Diseased of an Devic	

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Class A Common Stock	06/01/2024		М		2,364	A	\$ <mark>0</mark>	22,674	D	
Class A Common Stock	06/01/2024		F		690 ⁽¹⁾	D	\$9.66	21,984	D	
Class A Common Stock	06/01/2024		М		3,026	A	\$ <mark>0</mark>	25,010	D	
Class A Common Stock	06/01/2024		F		883(1)	D	\$9.66	24,127	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. Transac Code (Ir 8)	ction Derivative Expiration		6. Date Exerc Expiration D (Month/Day/	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	Reported	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		Transaction(s) (Instr. 4)		
Restricted Stock Units	(2)	06/01/2024		М			2,364	(3)	(3)	Class A Common Stock	2,364	\$0	4,727	D	
Restricted Stock Units	(2)	06/01/2024		М			3,026	(4)	(4)	Class A Common Stock	3,026	\$0	0	D	

Explanation of Responses:

1. Represents shares withheld by the Issuer to satisfy tax withholding obligations upon vesting.

2. Each restricted stock unit represents a contingent right to receive one share of Class A common stock of the Issuer.

3. The restricted stock units vest in four equal annual installments beginning June 1, 2023.

4. The restricted stock units vest 20% on the first anniversary of the grant date and 80% on the second anniversary of the grant date beginning June 1, 2023.

/s/ Richard Walker

06/04/2024

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.

** Signature of Reporting Person

Date