

OMB APPROVAL	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person * <u>GENERAL ATLANTIC, L.P.</u> (Last) (First) (Middle) <u>C/O GENERAL ATLANTIC SERVICE CO.,L.P.</u> <u>55 EAST 52ND STREET, 33RD FLOOR</u> (Street) <u>NEW YORK NY 10055</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Clear Secure, Inc. [YOU]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>01/26/2023</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

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)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Class A common stock	01/26/2023		J		724,658	A	(1)	6,662,472	I	See footnote ⁽³⁾⁽⁶⁾⁽⁷⁾⁽⁸⁾⁽⁹⁾⁽¹⁰⁾⁽¹¹⁾
Class A common stock	01/26/2023		s ⁽²⁾		1,801,352	D	\$29	4,861,120	I	See footnote ⁽⁴⁾⁽⁶⁾⁽⁷⁾⁽⁸⁾⁽¹⁰⁾⁽¹¹⁾

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) (Instr. 4)	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				
Class C common stock	(1)	01/26/2023		J ⁽¹⁾			724,658	(1)	(1)	Class A common stock	724,658	(1)	2,931,540	I	See footnote ⁽⁵⁾⁽⁹⁾⁽¹⁰⁾⁽¹¹⁾

1. Name and Address of Reporting Person *
GENERAL ATLANTIC, L.P.

 (Last) (First) (Middle)
C/O GENERAL ATLANTIC SERVICE CO.,L.P.
55 EAST 52ND STREET, 33RD FLOOR

 (Street)
NEW YORK NY 10055

 (City) (State) (Zip)

1. Name and Address of Reporting Person *
General Atlantic (SPV) GP, LLC

 (Last) (First) (Middle)
C/O GENERAL ATLANTIC SERVICE CO.,L.P.
55 EAST 52ND STREET, 33RD FLOOR

 (Street)
NEW YORK NY 10055

 (City) (State) (Zip)

1. Name and Address of Reporting Person *

GAP COINVESTMENTS III, LLC

(Last) (First) (Middle)

C/O GENERAL ATLANTIC SERVICE CO.,L.P.
55 EAST 52ND STREET, 33RD FLOOR

(Street)

NEW YORK NY 10055

(City) (State) (Zip)

1. Name and Address of Reporting Person *

GAP COINVESTMENTS IV, LLC

(Last) (First) (Middle)

C/O GENERAL ATLANTIC SERVICE CO.,L.P.
55 EAST 52ND STREET, 33RD FLOOR

(Street)

NEW YORK NY 10055

(City) (State) (Zip)

1. Name and Address of Reporting Person *

GAP Coinvestments V, LLC

(Last) (First) (Middle)

C/O GENERAL ATLANTIC SERVICE CO.,L.P.
55 EAST 52ND STREET, 33RD FLOOR

(Street)

NEW YORK NY 10055

(City) (State) (Zip)

1. Name and Address of Reporting Person *

GENERAL ATLANTIC GENPAR, L.P.

(Last) (First) (Middle)

C/O GENERAL ATLANTIC SERVICE CO.,L.P.
55 EAST 52ND STREET, 33RD FLOOR

(Street)

NEW YORK NY 10055

(City) (State) (Zip)

1. Name and Address of Reporting Person *

GENERAL ATLANTIC GENPAR (BERMUDA),
L.P.

(Last) (First) (Middle)

C/O CONYERS CLIENT SERVICES LIMITED,
CLARENDON HOUSE, 2 CHURCH STREET

(Street)

HAMILTON D0 HM 11

(City) (State) (Zip)

/s/ Ingrid van der Hoorn

01/30/2023

** 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.