FORM 4

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

OMB APPR	OVAL
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nours per response	e 0.5

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 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

(Print or Type R	Responses	s)														
1. Name and Address of Reporting Person* SOKOLOW NICOLAS				2. Issuer Name and Ticker or Trading Symbol Clarus Corp [CLAR]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)XDirector10% Owner					
6020 SHOR	E BOU	(First) LEVARD S	(Middle) SOUTH, #801	3. Date of Earliest Transaction (Month/Day/Year) 03/11/2022						Office	r (give title belo	w)	Other (specify l	pelow)		
(Street) GULPORT, FL 33707											6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)		(State)	(Zip)		Ta	able I	- Non	-Der	ivative S	ecurities	s Acqui	red, Disp	osed of, or I	Beneficially (Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Reported Transaction(s)			Ownership Form:	7. Nature of Indirect Beneficial Ownership		
				(World) Da	y/ 1 cai		ode	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)			or Indirect (I) (Instr. 4)	
Common Sto \$0.0001 per Stock")			03/11/2022				S		2,500	D	\$ 23.08	102,990			D	
Common Sto	ock		03/14/2022				S		2,500	D	\$ 23.5	100,490			D	
Common Sto	cock											35,000			I	See Footnote (1) (4)
Common Sto	ock											83,293			I	See Footnote (2) (4)
Common Sto	ock											379,244			I	See Footnote (3) (4)
Reminder: Rep	ort on a s	eparate line fo	r each class of secur	ities benefic	ially o	wned									an a	
								cont	ained ir	this fo	rm are	not requ		ormation spond unle trol numbe	ss	1474 (9-02)
				Derivative S e.g., puts, c								y Owned				
(Instr. 3) Prid Der	nversion	3. Transaction Date (Month/Day/	3A. Deemed Execution Date	te, if 4. Transc	action 8)	5. Num of	vative rities ired r osed	6. Da	and Expiration Date (Month/Day/Year) Am Und Sec		7. Tit Amo Unde Secu (Insti	Eitle and count of derlying str. 3 and Security (Instr. 5) 8. Price of Derivative Derivative Security (Instr. 5) 9. Numbre Derivative Securities Gecurities Owned Followin Reported Transact		Derivative Securities Beneficially	Owners Form of Derivati Security Direct (or Indire	Ownershi (Instr. 4) D)
				Code	e V	(A)		Date Exer		Expiratio Date	Title	Amount or Number of Shares				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		

SOKOLOW NICOLAS			
6020 SHORE BOULEVARD SOUTH, #801	X		
GULPORT, FL 33707			

Signatures

/s/ Nicolas Sokolow	03/15/2022
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) The securities reported herein are owned by Korsak Holdings, LLC, a limited liability company of which the Reporting Person is the general manager.
- (2) The securities reported herein are owned by Madetys Investments, LLC, a limited liability company of which the Reporting Person is the general manager.
- (3) The securities reported herein are owned by ST Investors Fund, LLC, a limited liability company of which the Reporting Person is the general manager.
- (4) The Reporting Person disclaims beneficial ownership of the securities described in this statement, except to the extent of his pecuniary interest in such securities.

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.