| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| | | Washington, D.C. 20049 | | | OMB A | PPROVAL | - |
|---|--|--|--|------------------------------------|--|---------------|------|
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See | _ | IT OF CHANGES IN BENEFICIAL OWN | OMB Number: 3235-0287 Estimated average burden hours per response: 0.5 | | | | |
| Instruction 1(b). | pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | ł | | | | | |
| 1. Name and Address of Reporting Person <u>Conley Bevin</u> | n* | 2. Issuer Name and Ticker or Trading Symbol Advantage Solutions Inc. [ADV] | all applicable Director | tor 10% Owner | | | |
| (Last) (First) ADVANTAGE SOLUTIONS INC | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 01/17/2024 | X | Officer (give below) Chief A | give title Other (spec below) f Accounting Officer | | fy |
| 15310 BARRANCA PARKWAY, | SUITE 100 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indivi Line) | dual or Joint | /Group Filing (| Check Applic | able |
| (Street) | | | X | Form filed b | by One Report | ing Person | |
| (Street) IRVINE CA | 92618 | | | Form filed b Person | by More than C | One Reporting | , |

|) | (State) | |
|---|---------|--|

(Zip)

(City

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.

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

Rule 10b5-1(c) Transaction Indication

| | | • | | | · · | | | | | |
|---------------------------------|--|---|---|---|----------------------------------|---------------|---|---|---|----------|
| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | ecution Date, ny Code (Instr. 5) Disposed Of (D) (Instr. 3, 4 and Securities Beneficially | | Disposed Of (D) (Instr. 3, 4 and | | 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 | Transaction(s) (Instr. 3 and 4) | | (1130.4) |
| Class A Common Stock | 01/17/2024 | | F | | 4,549(1) | D | \$3.62 | 171,037 | 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. Transa Code (8) | | of Deriv | r osed) r. 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Titl Amou Secur Unde Deriv Secur 3 and | int of rities rlying ative rity (Instr. | 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 Expiration Exercisable Date T | | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Represents shares withheld by the Company to satisfy tax withholding requirements on vesting of restricted stock units previously reported in Table I as Class A Common Stock.

| /s/ Bryce Robinson, Attorney- in-fact | 01/19/2024 |
|--|------------|
| ** 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.