Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

## **OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person*  Kaye Dean						2. Issuer Name and Ticker or Trading Symbol Advantage Solutions Inc. [ ADV ]									ck all app Direc	licable)			s) to Issuer  0% Owner  Other (specify	
		UTIONS INC.	Middle)	00		3. Date of Earliest Transaction (Month/Day/Year) 03/04/2022								X	belov			below)		
15310 BARRANCA PARKWAY, SUITE 100  (Street) IRVINE CA 92618  (City) (State) (Zip)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3ene	iciall	y Own	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Date,			Oate,	3. Transaction Code (Instr. 8) 4. Securities Disposed Of 5)						5. Amo Securi Benefi Owned Report	ties cially I Following	Form (D)	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or Pri		rice	Transa	Transaction(s) (Instr. 3 and 4)			(111341. 4)	
Class A Common Stock 03/04/2					2022				S		1,820(1)	D	) {	55.7 <sup>(1)</sup>	7	0,032	032 D			
Class A Common Stock 03/07/2				2022				S		7,067(2)	D \$5.		5.49 <sup>(2)</sup>	62,965			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)	if any	emed ion Date, /Day/Year)	Code (In				6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Security (Ir 3 and 4)		str.	Price of erivative ecurity 1str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	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	Amou or Numb of Share	er							

## **Explanation of Responses:**

- 1. Represents shares of Class A common stock sold to cover withholding tax liability in connection with the vesting and settlement of performance restricted stock units. The price reported in column 4 is a weighted average sale price. These shares were sold in multiple transactions at prices ranging \$5.59 to \$5.85. The Reporting Person, undertakes, upon by request by the Commission staff the Issuer or a security holder of the Issuer, to provide full information regarding the number of shares sold at each separate price.
- 2. Represents shares of Class A common stock sold to cover withholding tax liability in connection with the vesting and settlement of performance restricted stock units. The price reported in column 4 is a weighted average sale price. These shares were sold in multiple transactions at prices ranging \$5.33 to \$5.67. The Reporting Person, undertakes, upon by request by the Commission staff the Issuer or a security holder of the Issuer, to provide full information regarding the number of shares sold at each separate price.

/s/ Bryce Robinson, Title:

**Secretary** 

\*\* Signature of Reporting Person Date

03/08/2022

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.