FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average | burden | | | | | | | | |
| hours ner resnonse | . 05 | | | | | | | | |

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* Ratzan Brian K. | | | | | 2. Issuer Name and Ticker or Trading Symbol Advantage Solutions Inc. [ADV] | | | | | | | | (Check all ap | | ctor | | 10% Owner | | |
|--|---|------------|---|------------|--|-------|---|-----|-----------|------------------------|--|---|---|---|----------------------|---|-------------------|---------|--|
| (Last) (First) (Middle) C/O ADVANTAGE SOLUTIONS INC., | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/28/2021 | | | | | | | | | Office below | er (give title /) | | Other (below) | specify | |
| 15310 BARRANCA PARKWAY, SUITE 100 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) IRVINE | CA | A 9 | 2618 | | | | | | | | | | | X | | filed by One filed by Mo on | | Ü | |
| (City) | (Sta | ate) (Z | Zip) | | | | | | | | | | | | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secui | rities | Acq | uired | , Dis | posed of | , or E | Benefi | cially | Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day) | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Ins 5) | | | ired (A) nstr. 3, 4 | or I and | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | Code | v | Amount | (A) (D) | | | or Pri | ice | Transa | action(s) 3 and 4) | | | (Instr. 4) | | | | | | |
| Class A Common Stock 10/28/20 | | | | | 2021 | | A | | 11,666(1) | A \$0.0 | | 0.00 | 11,666 | | | 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 Execution Date, if any (Month/Day/Year) | | Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Code V (A) (D) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) Amoun or Numbe of Title Shares | | t | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | LO. Dwnership Form: Direct (D) Or Indirect I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | | | | |

Explanation of Responses:

1. Represents an award of restricted stock units (RSUs) that is a contingent right to receive Class A Common Stock upon vesting. The RSUs are scheduled to vest on the earlier of the one-year anniversary of the date of grant or the day immediately preceding the date of the first annual meeting of the Issuer's stockholders occurring after the grant date.

/s/ Brian K. Ratzan

11/01/2021

** 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.