FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average h | nurden | | | | | | | | |

0.5

hours per response:

| | Check this box if no longer subject to |
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| ٦. | Section 16. Form 4 or Form 5 obligations may continue. See |
| J | 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* NICKELSON DONALD E | | | | | | 2. Issuer Name and Ticker or Trading Symbol FIRST ADVANTAGE CORP [FADV] | | | | | | | | | elationship eck all appli X Directo | cable) | rting Person(s) to Issuer | | | |
|--|---|--|--|---------|---|--|----------|--------------------------------------|------------------------------------|--------|---|------------------|----------------|---|---|---------|--|---|------------|--|
| (Last) 100 CAF | | | | | | | f Earlie | est Trans | saction (M | onth/I | Day/Year) | _ | _ | (give title | | | · | | | |
| (Street) ST. PETERS | BURG F | L | 33716 | 4. 11 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | 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) | (S | State) | (Zip) | | | | | | | | | | | | | | | | | |
| | | Tab | le I - Nor | n-Deriv | ative | Sec | curiti | ies Ac | quired, | Dis | posed o | of, or E | ene | ficial | y Owned | i | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | action 2A. Deemed Execution Date, if any (Month/Day/Year) | | | Transaction Disposed Code (Instr. 5) | | | rities Acquired (A) ed Of (D) (Instr. 3, 4 | | | Benefici | es Formially (D) (Following (I) (I | | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | | Price | Transac (Instr. 3 | tion(s) | | | (111501.4) | |
| Class A Common Stock 04/27/ | | | | | 7/200 | /2009 | | | M | | 945 ⁽²⁾ A | | (1) | 1, | 1,891 | | D | | | |
| | | 7 | Гable II - | | | | | | | | osed of onverti | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | 4. Transaction Code (Instr. 8) | | n of | | 6. Date E Expiratio (Month/D | n Date | Amount of | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial) Ownership ct (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | or Nu of | umber | | | | | | |
| Restricted Stock Unit | (1) | 04/27/2009 | | | M | | | 945 ⁽²⁾ | (3) | | (3) | Class A Commo | | 945 | (1) | 2,221 | | D | | |

Explanation of Responses:

- $1.\ Each\ restricted\ stock\ unit\ represents\ a\ contingent\ right\ to\ receive\ one\ share\ of\ FADV\ common\ stock.$
- $2. \ Second \ annual \ cumulative \ vesting \ of \ 33.33\% \ of \ the \ 2,838 \ restricted \ stock \ units \ awarded \ to \ the \ reporting \ person \ on \ April \ 26, \ 2007.$
- 3. The restricted share units granted the reporting person on April 26, 2007 vest in 3 annual installments of 33.3%, 33.3% and 33.4% repsectively, with the first vesting on April 26, 2008 and expiring April 26, 2010.

<u>Sharlyn Nudelman, Power of</u>
<u>Attorney</u>
<u>04/27/2009</u>

** 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.