FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C

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MB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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* Price Bridgett R | | | | | 2. Issuer Name and Ticker or Trading Symbol FIRST ADVANTAGE CORP [FA] | | | | | | | | | | ationship k all app Direc | , | ng Perso | on(s) to Is | |
|--|---|--|---|----------|--|---|---|-------|--|------------|--------------------|---|---|-----------------|---|--|---|---|--|
| (Last) | ast) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/07/2024 | | | | | | | | | Office below | er (give title v) | | Other (s below) | pecify |
| C/O FIRST ADVANTAGE CORPORATION 1 CONCOURSE PARKWAY NE, SUITE 200 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Ind Line) | <u>·</u> | | | | | |
| (Street) | treet) TLANTA GA 30328 | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | | |
| (City) | (Sta | ate) (Z | Zip) | | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | ided to | | | | | |
| | | Table | I - Noi | n-Deriva | tive S | ecui | rities | Acq | uired, | Dis | oosed of | , or I | 3ene | eficially | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Execution | | | Date, | | | | es Acquired (A) Of (D) (Instr. 3, | | | | ties cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | Code | v | Amount | (A) (D) | or | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | Instr. 4) | | |
| Common Stock 06/07/2 | | | | | 2024 | | A ⁽¹⁾ | | 10,672 | 1 | A | \$ <mark>0</mark> | 39,252 | | 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. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercis Expiration Date (Month/Day/Yea | | te | 7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4) | | De Se (In | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | y O Fo O (I) | D. wnership orm: irect (D) r Indirect) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amo or Num of Sha | nber | | | | | |

Explanation of Responses:

1. Represents a grant of restricted stock units which will vest on the first anniversary of the date of grant, or, if earlier, the date which is the business day immediately preceding the date of the annual meeting of the Company's stockholders in 2025, subject to the director's continued service through the vesting date.

/s/ Bret T. Jardine, Attorney-

in-Fact

06/11/2024

** 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.