FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

washington, D.C. 20049

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* McMahon Frank Vincent							2. Issuer Name and Ticker or Trading Symbol FIRST ADVANTAGE CORP [FADV]								of Reportir icable) tor	g Perso	n(s) to Issu 10% Ow	
(Last) (First) (Middle) 100 CARILLON PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 04/29/2009								Office belov	er (give title		Other (s below)	pecify
(Street) ST. PETERSBURG FL 33716					4.1	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)																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Benefic Owned	es ially Following	6. Own Form: I (D) or I (I) (Inst	Direct I ndirect E r. 4) (7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) o (D)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			msu. 4)
Class A Common Stock 04/29/						2009			M		1,054	3) A	(2)	1	1,858)	
Class A Common Stock 04/29/2						/2009			J ⁽¹⁾		606	A	(2)	2	2,464)	
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 I if any (Month/Day	Date,		ransaction ode (Instr.		Derivative		6. Date Exercisal Expiration Date (Month/Day/Year		Amount of		8. Price o Derivative Security (Instr. 5)		e (Constitution of the Constitution of the Con	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Co	Code	V	(A)	(D)	Date Exercisa		Expiration Date	Title	Amour or Number of Shares		(Instr. 4)	3,11(3)		
Restricted Stock Unit	(2)	04/29/2009			M	M		1,054 ⁽³⁾	(4)		(4)	Class A Common Stock	1,054	. (2)	3,05	9	D	

Explanation of Responses:

- 1. As a provision of his agreement with the Compensation Committee of The First American Corporation (FAF), the reporting person has agreed that during his term of employment with FAF, he will remit to FAF any after-tax benefit received as a result of the grant of these restricted stock units
- 2. Each restricted stock unit represents a contingent right to receive one share of FADV common stock.
- 3. First vesting of the 3,166 restricted stock units the reporting person received as his 2008 annual equity retainer as a director of FADV.
- 4. The restricted units vest cumulatively in 3 annual installments with the first installment vesting April 29, 2009. The first year and second year vesting installments are 33.3% each. The third year vesting installment is at 33.4%.

Sharlyn Nudelman, Power of

<u>Attorney</u>

04/30/2009

** 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.