FORM 4

### **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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).

affirmative defense conditions of Rule

#### 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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the

10b5-1(c). See Inst	ruction 10.			
Name and Address of Reporting Person*     Bacchus Amir			2. Issuer Name <b>and</b> Ticker or Trading Symbol P3 Health Partners Inc. [ PIII ]	S. Relationship of Reporting Person(s) to Issuer     (Check all applicable)     X Director 10% Owner
(Last) C/O P3 HEALTH	(First) I PARTNERS INC	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/09/2024	X Director 10% Owner  X Officer (give title Other (specify below)  Chief Medical Officer
2370 CORPORATE CIRCLE, SUITE 300  (Street)  HENDERSON NV 89074			4. If Amendment, Date of Original Filed (Month/Day/Year)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person
(City)	(State)	(Zip)		

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Class A Common Stock	01/09/2024		<b>J</b> <sup>(1)</sup>		287,118	A	(1)	2,005,193	D	
Class A Common Stock								251,298	I	By Charlee Co LLC <sup>(2)</sup>

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

, , , , , , , , , , , , , , , , , , ,	2. Conversion or Exercise Price of Derivative Security	 3A. Deemed 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)		Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form: Direct (D)	Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			

#### Explanation of Responses:

1. On January 3, 2024, the Reporting Person filed a Form 4 reporting the withholding of 287,118 shares of Class A common stock to satisfy tax withholding requirements upon the vesting of restricted stock units. On January 9, 2024, the withholding was rescinded upon election by the Reporting Person to satisfy tax withholding obligations via a cash payment and no shares were withheld.

2. These shares are held directly by Charlee Co LLC, an entity for which the Reporting Person serves as managing member.

#### Remarks:

/s/ Jessica Puathasnanon, as attorney-in-fact

\*\* Signature of Reporting Person Date

01/17/2024

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.