FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person *- WASSON GREGORY D			2. Issuer Name and Ticker or Trading Symbol P3 Health Partners Inc. [PIII]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner								
(Last) (First) (Middle) C/O P3 HEALTH PARTNERS INC., 2370 CORPORATE CIRCLE, SUITE 300			3. Date of Earliest Transaction (Month/Day/Year) 03/24/2022							Officer (give	e title below)	Oth	er (specify below)				
(Street) HENDERSON, NV 89074			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person								
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui						ired, I	ired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea			2A. Deemed Execution D any (Month/Day		Date, if		nsaction 8)	(A)	4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)						Ownership Form: B Direct (D) Or Indirect (I	f. Nature of Indirect Beneficial Ownership Instr. 4)	
						Coo	de V	Am	ount (A) o	r Price				(I) (Instr. 4)			
Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number. 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)		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Expiration (Month/	on Da	n Date		7. Title and At of Underlying Securities (Instr. 3 and 4			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect s) (I)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option (Right to Buy)	\$ 7.95	03/24/2022		A		85,535	5	<u>(1)</u>	. (03/24/203	Clas Comi Sto	mon	85,535	\$ 0	85,535	D	

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
WASSON GREGORY D C/O P3 HEALTH PARTNERS INC. 2370 CORPORATE CIRCLE, SUITE 300 HENDERSON, NV 89074	X						

Signatures

/s/ Jessica Puathasnanon, as attorney-in-fact	03/28/2022
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) The option vests and becomes exercisable with respect to 50% of the shares on each of March 24, 2023 and March 24, 2024.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.