FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
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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)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person* Goodman Matthew						2. Issuer Name and Ticker or Trading Symbol <u>Digital Media Solutions, Inc.</u> [DMS]									(Ch	eck all appli Directo	,		son(s) to Iss 10% Ov Other (s	vner	
	ITAL MEI	DIA SOLUTION			3. Date of Earliest Transaction (Month/Day/Year) 08/19/2021								7	below)		natio	below) ation Officer				
4800 140TH AVENUE N., SUITE 101 4. If Amendment, Date of									of Ori	riginal Fi	iled	(Month/Da	ıy/Yeaı	r)		6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) CLEARY	WATER F	L	33762													X Form filed by One Reporting Person					
					-											Form f Persor		e than	One Repor	rting	
(City)	(S		(Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Trans Date (Month/I					existion 2A. Deemed Execution Date, if any (Month/Day/Yea			Code (Instr. 5)						es Form ally (D) o Following (I) (In		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
										Code	v	Amount (A) or (D)		Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)		
Class A Common Stock, Par Value \$0.0001 per share					9/202	9/2021			A		8,694 ⁽¹⁾ A		A	\$ <mark>0</mark>	16	16,533		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 (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)					Code (Instr				6. Date Exercisa Expiration Date (Month/Day/Yea		of Securities		curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exe	e ercisable		xpiration ate	Title	OI N OI	umber						
Non- Qualified Stock Option (Right to Buy)	\$7.98 ⁽²⁾	08/19/2021			A		19,993		08/:	19/2021	0	8/19/2031	Class Comr Stoo Pa Valu \$0.00 per sh	mon ck, ar 1 ue 001	9,993	\$0	19,99.	3	D		

Explanation of Responses:

- 1. Reflects restricted shares units ("RSUs") granted pursuant to the terms of the Issuer's 2020 Omnibus Incentive Plan (the "Plan") that will vest 25% annually over four years beginning on August 19, 2022, provided that the Reporting Person remains in continuous employment with the Issuer through the applicable vesting date. The RSUs were awarded in an exempt transaction pursuant to Rule 16b-3(d) of the Securities Exchange Act of 1934, as amended.
- 2. Reflects non-qualified stock option (the "Option") granted pursuant to the terms of the Plan. with an exercise price of \$7.98, which was the fair market value on the grant date. The Option will vest 25% annually over four years beginning on August 19, 2022, provided that the Reporting Person remains in continuous employment with the Issuer through the applicable vesting date. The Options were awarded in an exempt transaction pursuant to Rule 16b-3(d) of the Securities Exchange Act of 1934, as amended.

Remarks:

/s/ Joseph Marinucci, as attorney-in-fact for Matthew

08/23/2021

Goodman

** 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.