FORM 4

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

Washington,	D.C.	20549
vvasimigtori,	D.C.	20040

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPI	ROVAL									
	OMB Number:	3235-0287									
	Estimated average burden										
- 1	hours per respense:	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*  Borghese Fernando						2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Digital Media Solutions</u> , <u>Inc.</u> [ DMS ]										eck a	all application	,		ner		
(Last) (First) (Middle) C/O DIGITAL MEDIA SOLUTIONS, INC.							3. Date of Earliest Transaction (Month/Day/Year) 10/22/2020										X	below)			below)	peony
4800 140TH AVENUE N., SUITE 101  (Street)  CLEARWATER FL 33762					4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)		(State		Zip)	D		Person															
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				action	ear)	ZA. Deemed Execution Date, f any (Month/Day/Year)		3. Tran	3. 4. S Transaction Dis Code (Instr. 5)		Secu	curities Acquired (A) osed Of (D) (Instr. 3,			) or 5. 4 and Se Be		5. Amount of Securities Beneficially Owned Following Reported		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						tivo :	ive Securities A			Code			moun	(D)			Transact (Instr. 3 a		tion(s)			ilisu. 4)
			'							,				i, or Be		•	Ov	vneu				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, T Security or Exercise (Month/Day/Year) if any					ransaction of ode (Instr. Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year)			and	7. Title an of Securit Underlyir Derivative (Instr. 3 a	D		Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	(A)		Date Exercisa	e Ex ercisable Da		ition	Title	Amount or Number of Shares							
Units of Digital Media Solutions Holdings, LLC	(1)									(1)		(1)		Class A common stock	31,3	391 <sup>(2)</sup>			5,731,5	88	I	See footnote <sup>(3)</sup>

## **Explanation of Responses:**

- 1. Each unit of Digital Media Solutions Holdings, LLC, indirect subsidiary of the Issuer ("Unit"), may be redeemed by the holder for cash in an amount equal to the value of one share of the Issuer's Class A Common Stock ("Class A Common Stock") at the Issuer's option, the Issuer may acquire each Unit in exchange for one share of Class A Common Stock or the cash value thereof, in each case subject to certain restrictions. Upon a redemption or acquisition of such Units, an equal number of the Unit holder's non-economic, voting shares of the Issuer's Class B Common Stock will be cancelled.
- 2. Pursuant to the Business Combination Agreement dated April 23, 2020 by and among Leo Holdings Corp., Digital Media Solutions LLC, Prism Data, LLC ("Prism") and the other parties thereto, these shares were issued in connection with a post-closing adjustment.
- 3. The Reporting Person indirectly owns 5,731,588 Units, which are owned directly by Prism. The Reporting Person is a member of Prism.

## Remarks:

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

10/23/2020

**Borghese** 

\*\* 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.