(Street)

(City)

(Last)

**DALLAS** 

Williams Mel

C/O P10, INC.

TX

(State)

(First)

1. Name and Address of Reporting Person\*

75205

(Zip)

(Middle)

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden

Check this box if no longer subject to Section 16. Form 4 or Form 5

	ions may conti tion 1(b).	nue. See		Fi					a) of the Secu				934		hours	per re	sponse:	0.5	
Name and Address of Reporting Person*     2. Issue												Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner							
(Last) (First) C/O P10, INC. 4514 COLE AVENUE, SUITE 160		(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/02/2022							Officer (give title X Other (specify below)  See Remarks							
(Street)			75205		4.1	If Ame	endment, [	Date	f Original Filed (Month/Day/			y/Year)		ne) Form f V Form f	Form filed by One		rting Perso	n	
(City)	(S	tate)	(Zip)											1 01301					
			ole I - Nor						quired, Di	_				<del></del>		Ι	1		
1. Title of Security (Instr. 3)		Date		saction n/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Inst	on E tr. 5	Disposed 5)	ities Acquired (A) d Of (D) (Instr. 3, 4		Benefici	es ally Following d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
		-							uired, Dis	pos		or Bene	eficiall	(Instr. 3			ļ		
1. Title of	2.	3. Transaction	3A. Deeme		puts,	cal	s, warra		6. Date Exerc			7. Title and		8. Price of	9. Numbe	r of	10.	11. Nature	
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execution Date, if any		Transa Code ( 8)		ı of		Expiration Date (Month/Day/Year)		ic and	of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivative Security	derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	e S Ily	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Exp Dat	oiration te	Title	Amount or Number of Shares						
Restricted Stock Units <sup>(1)</sup>	(2)	03/02/2022			A		33,540		(3)		(3)	Common Stock	33,540	\$0.00	33,54	0	D <sup>(4)</sup>		
Restricted Stock Units <sup>(1)</sup>	(2)	03/02/2022			A		33,540		(5)		(5)	Common Stock	33,540	\$0.00	33,54	0	D <sup>(6)</sup>		
	nd Address of Edwin A	f Reporting Person*																	
(Last) C/O P10 4514 CO		(First) UE, SUITE 1600	(Midd	le)															
(Street)	S	TX	7520	)5															
(City)		(State)	(Zip)																
		f Reporting Person* Onial Fund, u/		11/15	/201	<u>5</u>													
(Last) C/O P10	, INC.	(First)	(Midd	le)															
4514 CO	LE AVENU	UE, SUITE 1600	)																

4514 COLE AV	4514 COLE AVENUE, SUITE 1600										
(Street) DALLAS	TX	75205									
(City)	(State)	(Zip)									

## **Explanation of Responses:**

- 1. This Form 4 is being filed by Edwin Poston and Mel Williams (collectively, the "Reporting Persons"). The Reporting Persons are members of a Section 13(d) group that collectively beneficially owns more than 10% of the Issuer Scommon Stock. Each of the Reporting Persons disclaims beneficial ownership of the securities of the Issuer reported herein, except to the extent of his pecuniary interest therein, and the filing of this Form 4 shall not be construed as an admission that the Reporting Persons are beneficial owners of the securities of the Issuer reported herein.
- 2. Each RSU represents a right to receive one share of the Issuer's Class A Common Stock upon vesting.
- 3. Edwin Poston was granted 33,540 RSUs which will vest on 3/2/2023, provided that Mr. Poston remains in continuous service.
- 4. These RSUs are owned directly by Edwin Poston.
- 5. Mel Williams was granted 33,540 RSUs which will vest on 3/2/2023, provided that Mr. Williams remains in continuous service.
- 6. These RSUs are owned directly by Mel Williams.

## Remarks:

Member of 10% Owner Group (see Footnote 1)

/s/Amanda Coussens as
Attorney-in-Fact for the
Reporting Persons

\*\* 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.