FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPR | OVAL | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| 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).

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

| Name and Address of Reporting Person* CARACCIOLO ELIZABETH | | | | | 2. Issuer Name and Ticker or Trading Symbol VERRA MOBILITY Corp [VRRM] | | | | | | | eck all applic | able) | ing Person(s) to Issuer 10% Owner Other (specif | | ner | |
|--|--|--|---|-------------|---|---------|--------------|--|----------|---------------------------|---|-------------------------------------|---|--|--------|--|---------------------------------------|
| (Last) | ` | irst) HOOL ROAD | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 10/23/2018 | | | | | | | X below) | | | below) | Jeony | |
| (Street) MESA (City) | A (S | | 85201 (Zip) | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. I Lin | e) <mark>X</mark> Form fi | r Joint/Group Filing (Check Applicable n filed by One Reporting Person n filed by More than One Reporting on | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Execution Date, | | Code (Instr. | | | 5) Securitie Beneficia | Securities Beneficially Owned Following | | Direct II ndirect E r. 4) C | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | Code | <u> </u> | Amount | (A) o (D) | r Price | Transacti (Instr. 3 a | ion(s) | | | 1130. 4) |
| 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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code (Instr | | | | 6. Date Exercisable and 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 Transaction(s) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | | piration ate | Title | Amount or Number of Shares | | (Instr. 4) | 11(3) | | |
| Restricted Stock Units | \$0.00 ⁽¹⁾ | 10/23/2018 | | A | | 277,301 | | (2) | | (2) | Class A Common Stock | 277,301 | \$0.00 | 277,301 | | D | |

Explanation of Responses:

- $1.\ Each\ restricted\ stock\ unit\ represents\ a\ contingent\ right\ to\ receive\ one\ share\ of\ Verra\ Mobility\ Corporation\ Class\ A\ Common\ Stock.$
- 2. The restricted stock units shall vest in four (4) equal annual installments beginning on October 23, 2019. Vested shares will be delivered to the reporting person on each settlement date.

Remarks:

/s/ Elizabeth Caracciolo by
Rebecca Collins, as Attorney

Rebecca Collins, as Attorney- 10/25/2018

in-Fact

** 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.