

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

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF 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 Type Responses) | | | | | | | |
|--|--|---|--|-----------------------|---|--|--|
| 1. Name and Address of Reporting Person [*] Seaside Holdings (Nominee) Ltd | 2. Date of Event Requiring Statement (Month/Day/Year) 11/08/2021 | 3. Issuer Name and Ticker or Trading Symbol SDCL EDGE Acquisition Corp [SEDA] | | | | | |
| (Last) (First) (Middle) PO BOX 82, FLOOR 2, TRAFALGAR COURT | 11/00/2021 | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner | | | 5. If Amendment, Date Original Filed(Month/Day/Year) 11/08/2021 | | |
| (Street) LES BANQUES, Y7 GY1 4LY | | Officer (give title Other (specify below) Delta (specify below) | | | 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person X_Form filed by More than One Reporting Person | | |
| (City) (State) (Zip) | Table I - Non-Derivative Securities Beneficially Owned | | | | | | |
| 1.Title of Security (Instr. 4) | 2. Amount of Se Beneficially Own (Instr. 4) | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Natur (Instr. 5 | re of Indirect Beneficial Ownership) | | |
| Class A ordinary shares | | D (1) | | | | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security | 2. Date Exer | cisable | 3. Tit | le and Amount of | 4. Conversion | 5. Ownership | 6. Nature of Indirect Beneficial | |
|---------------------------------|---|------------|--|-------------------------------|---------------|------------------|----------------------------------|--|
| (Instr. 4) | and Expiration Date (Month/Day/Year) | | Securities Underlying Derivative Security | | or Exercise | Form of | Ownership | |
| | | | | | Price of | Derivative | (Instr. 5) | |
| | | | (Instr. 4) | | Derivative | Security: Direct | | |
| | Date | Expiration | | | Security | (D) or Indirect | | |
| | Exercisable | Date | Title | Amount or Number of Shares | | (I) | | |
| | Excicisable | Dute | | Shares | | (Instr. 5) | | |

Reporting Owners

| | Relationships | | | | |
|--|---------------|--------------|---------|-------|--|
| Reporting Owner Name / Address | | 10% Owner | Officer | Other | |
| Seaside Holdings (Nominee) Ltd PO BOX 82, FLOOR 2, TRAFALGAR COURT LES BANQUES, Y7 GY1 4LY | | Х | | | |
| Hands Guy PO BOX 82, FLOOR 2, TRAFALGAR COURT LES BANQUES, Y7 GY1 4LY | | Х | | | |

Signatures

| /s/ Susan Norman, Susan Norman on behalf of Seaside Holdings (Nominee) Limited /s/ Guy Hands | 02/14/2022 |
|--|------------|
| Signature of Reporting Person | Date |

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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).
- Guy Hands is the sole shareholder and ultimate beneficial owner of Seaside Holdings (Nominee) Limited ("Seaside") and has investment control over the securities held by Seaside. By virtue of that relationship, Mr. Hands may be deemed a beneficial owner of the securities held by Seaside. Mr. Hands disclaims beneficial ownership of the securities held by Seaside except to the extent of his pecuniary interest therein. Explanatory Note: The original Form 3 included Class B ordinary shares owned by the Reporting Persons in Table II. This amended Form 3 removes the Class B ordinary shares as those shares are currently not required to be reported.

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.