Instruction 1(b).

FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

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

| | | | 01 000 | | | Ipany Act of 1940 | | | | | |
|--|--------------|----------------|------------------------------------|--|---|---|---|--|---|---|--|
| 1. Name and Address of Reporting Person* Gil Alexis II (Last) (First) (Middle) | | | <u>INT</u> <u>COF</u> 3. Dat | <u>RP.</u> [IAS] e of Earliest Transa | SCIENČI | <u>E HOLDING</u> | | ationship of Reportin (all applicable) Director Officer (give title below) | 10% C | Owner (specify) | |
| C/O INTEGRA | L AD SCIENCE | HOLDING CO | ORP. $ ^{12/01}$ | /2023 | | | | Chief Accou | | | |
| 12 E. 49TH STREET, 20TH FLOOR | | | 4. If Ai | mendment, Date of | Original Filed | l (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| | | | | | | | X | Form filed by On | e Reporting Per | son | |
| (Street) | | | | | | | | Form filed by Mo | re than One Rei | porting | |
| NEW YORK | NY | 10017 | | | | | | Person | | portang | |
| (City) | (State) | (Zip) | Rule | e 10b5-1(c) | Transact | ion Indication | | | | | |
| | | | | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | |
| | Ta | ble I - Non-De | erivative S | ecurities Acq | uired, Disp | oosed of, or Benef | icially | Owned | | | |
| Date | | | ransaction e onth/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |

| | (Month/Day/Year) 8) | | | | | | | Reported | (I) (Instr. 4) | (Instr. 4) | |
|--|---------------------|--|---------|---|--------|---------------|-----------------------|------------------------------------|----------------|------------|--|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) | |
| Common Stock, \$0.001 par value 12/01/2023 A 123,372 A \$0 | | | | | | | | | D | | |
| Table U | Dealers there Or | | and the | | | | 6 1 - 1 - 11 4 | 0 | | | |

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) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) o Dispo of (D (Instr | 5. Number of Expiration Date Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ate Amount of | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--|--|---------------------|--------------------|-------|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

Remarks:

/s/ Yossi Almani, by Power of 12/05/2023 Attorney

** 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.