SEC Form	4
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# FORM 4

# 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								

hours per response:

Chief Executive Officer

6. Individual or Joint/Group Filing (Check Applicable

Form filed by One Reporting Person

Form filed by More than One Reporting

. . . . . . . . .

10% Owner Other (specify

0.5

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 <sup>*</sup> Utzschneider Lisa			2. Issuer Name and Ticker or Trading Symbol INTEGRAL AD SCIENCE HOLDING		lationship of Reporting Person(s) to Issuer ck all applicable)		
<u>Otzsenne</u>	Idel Lisa		CORP. [ IAS ]	X	Director	10% Owner	
				v	Officer (give title	Other (speci	
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Dav/Year)		below)	below)	

#### (First) 04/08/2024 C/O INTEGRAL AD SCIENCE HOLDING CORP. 12 E 49TH STREET, 20TH FLOOR 4. If Amendment, Date of Original Filed (Month/Day/Year) (Street) 10017 NEW YORK NY

(Zip)

(City) (State)

# Rule 10b5-1(c) Transaction 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.

Line)

X

Person

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Disposed Of			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock, \$0.001 par value	04/08/2024		<b>S</b> <sup>(1)</sup>		30,407	D	<b>\$10.05</b> <sup>(2)</sup>	188,678	D	

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			(= 3 / 1=	,	,		,					,								
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)	Transaction Code (Instr. 8)		Transaction Code (Instr.		Date, Transaction Code (Instr.		Transaction of Code (Instr. Derivative		of Expiration Date // Derivative (Month/Day/Year) S Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		Expiration Date (Month/Day/Year)			Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form:	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:

1. Mandatory sale to cover tax liability associated with the settlement of market stock units.

2. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$9.89 to \$10.22 per share. The reporting person undertakes to provide to Integral Ad Science Holding Corp., any security holder of Integral Ad Science Holding Corp. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth herein.

### Remarks:

/s/ Yossi Almani, by Power of 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.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)