SEC Form 4		
FORM	4	

UNITED STATES	SECURITIE	S AND EXCHAN	IGE COMMISSION

Washington, D.C. 20549

	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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J	Check this box to indicate that a	
1.00	transaction was made pursuant to a	
	contract, instruction or written plan	
	for the purchase or sale of equity	
	securities of the issuer that is	
	intended to satisfy the affirmative	
	defense conditions of Rule 10b5-	
	1(c). See Instruction 10.	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL								
OMB Number: 3235-0								
Estimated average b	ourden							
hours per response:	0.5							

1. Name and Address of Reporting Person [*] Gil Alexis II		n [*]	2. Issuer Name and Ticker or Trading Symbol <u>INTEGRAL AD SCIENCE HOLDING</u> <u>CORP.</u> [IAS]	(Check	tionship of Reporting Perso all applicable) Director Officer (give title	on(s) to Issuer 10% Owner Other (specify
	AL AD SCIENCE HOLDING CODD		3. Date of Earliest Transaction (Month/Day/Year) 11/06/2024	v	below) Chief Accounting	below)
(Street) NEW YORK (City)	NY (State)	10017 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi Line)	idual or Joint/Group Filing Form filed by One Repor Form filed by More than Person	ting 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)		3. 4. Securities Acquired (A) or 5. Amount of Transaction Disposed Of (D) (Instr. 3, 4 and 5. Code (Instr. 5. Beneficially 8) Owned Following Reported		Disposed Of (D) (Instr. 3, 4 and 5)		Form: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount (A) or (D) Price		Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock, \$0.001 par value	11/06/2024		S		14,355(1)	D	\$13	127,112	D	

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

			(e.g., pr	its, ca	ans, v	varia	ants,	options, c	convenuo.	ie se	cunties)						
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		Expiration Date (Month/Day/Year) urities uired or iosed 0) 		f Expiration Date Amount of Derivative derivative erivative (Month/Day/Year) Securities Derivative Securities cquired Underlying Derivative Securities a) or isposed Security (Instr. Beneficially f (D) 3 and 4) and 4) rransaction((Instr. 4))		Amount of Securities Underlying Derivative Security (Instr.		Amount of Securities Underlying Derivative Security (Instr. 3) and 4)		Securities Beneficially Owned Following Reported Transaction(s)	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:

1. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan. Such Rule 10b5-1 trading plan was adopted by the Reporting Person on December 8, 2023. **Remarks:**

/s/ Yossi Almani, by Power of 11/08/2024

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.