FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
rvasiliigtoii,	D.C.	20040	

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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

Name and Address of Reporting Person* Utzschneider Lisa						2. Issuer Name and Ticker or Trading Symbol INTEGRAL AD SCIENCE HOLDING CORP. [IAS]									tionship of Reportin all applicable) Director		10% Ov		wner
(Last) C/O INT	,	rst) (F D SCIENCE HC	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/07/2023									Officer (give title below) Chief Execu		utive	Other (s below) Officer	specify
12 E 49TH STREET, 20TH FLOOR					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicab Line)						
(Street) NEW Y	(Street) NEW YORK NY 10017													X	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Si	tate) (Z		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.													
		Table	I - No	on-Deriva	tive S	Secui	rities	Acc	quired	l, Dis	sposed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)				Execu Year) if any		eemed ution Date, / th/Day/Year)					Securities Acquired (A) sposed Of (D) (Instr. 3, 4			Securi Benefi Owned	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Transa		action(s) 3 and 4)			(Instr. 4)
Common	n Stock, \$0.001 par value		11/07/20	.023				S ⁽¹⁾		8,428	D	\$13.8	1 ⁽²⁾	125,929			D		
		Tal	ble II								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	eemed ution Date, th/Day/Year)		Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exer ation D h/Day/		7. Title Amou Secur Under Deriva Secur 3 and	nt of ities lying ative ity (Instr. 4)	Der Sec	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	isable	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 \$13.63 to \$13.94 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

11/08/2023

** 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.