FORM 4

UNITED STATES SECU

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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	OMB Number:		3235-0287			
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	Check this box if no longer subject to									
	Section 16. Form 4 or Form 5									
	obligations may continue. See									
	Instruction 1(b).									

Check this box to indicate that a 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 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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	OMB Number:	3235-0287									
	Estimated average burden										
	hours per response	: 0.5									
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Shamsu (Last)	ıddin Kat							nd Tick	er or Tra	adina :	Symbol			5 Pal	ationehir	of Reportin	ng Per	son(s) to Is	suer
l ` ′	`		1. Name and Address of Reporting Person* Shamsuddin Kate Marie				2. Issuer Name and Ticker or Trading Symbol Definitive Healthcare Corp. [DH]									10% Ov			
(Last) (First) (Middle) C/O DEFINITIVE HEALTHCARE CORP. 492 OLD CONNECTICUT PATH, SUITE 401						3. Date of Earliest Transaction (Month/Day/Year) 12/14/2024							V	Officer (give title below) CHIEF OPERATING OFFICER				`	
(Street) FRAMINGHAM MA 01701 (City) (State) (Zip)					4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi						
		Table	I - Noi	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	icially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			, 4 and Securi Benefi Owned		ties Folicially (D		orm: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership					
							Code	v	Amount	(A) or (D) Pri		rice	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)		
Class A Common Stock 12/14/2					/2024		F ⁽¹⁾		1,044	Г	\$	64.49	49 427,515			D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Security (Instr. 3)	of 2. 3. Transaction 3A. Deemed 4 ve Conversion Date Execution Date, T or Exercise (Month/Day/Year) if any		4. Transa Code (8)		of	r osed) : 3, 4	6. Date Exerci Expiration Da (Month/Day/Yo		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		tr.	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

1. The transaction reported represents the withholding of shares by the issuer to satisfy the reporting person's tax withholding obligations in connection with the vesting and settlement of previously

reported restricted stock units.

/s/ Matthew Ruderman, Attorney-in-Fact

12/17/2024

Date

** Signature of Reporting Person

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.