Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C. 20549
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Check this box if no longer subject	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
to Section 16. Form 4 or Form 5	
obligations may continue. See	

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 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

Name and Address of Reporting Person* Stephenson Scott G				2. Issuer Name and Ticker or Trading Symbol Definitive Healthcare Corp. [DH]									(Ct	Relationship neck all app X Direc	,	ng Per	rson(s) to Is		
(Last)	(Fir	st) (M	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 05/22/2024										Office below	er (give title v)		Other (s below)	specify
C/O DEFINITIVE HEALTHCARE CORP. 492 OLD CONNECTICUT PATH, SUITE 401					4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Lin	e)		up Filing (Check Applicable		
(Street) FRAMINGHAM MA 01701				Dula 10hE 1(a) Transaction Indication										Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	ľip)		$ _{\square}$	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.												nded to	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Executive Execut		Deemed cution Date, ly nth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securitie Disposed (5)		es Acquired (A) Of (D) (Instr. 3, 4		(A) or 3, 4 an	Benefi	ties cially Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A)) or))	Price	Transa	ection(s) 3 and 4)			(Instr. 4)	
Class A Common Stock 05/22/2					2024				A		26,759(1	1) A		\$0	6	68,213		D	
	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)	ative Conversion Date rity or Exercise (Month/Day/Year) Execution Date, if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		nstr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owner Form: Direct or Ind (I) (Ins	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	or Nun of	ount nber res					

Explanation of Responses:

1. Represents restricted stock units ("RSUs"), each representing a contingent right to receive one share of the Issuer's Class A Common Stock, par value \$0.001, vesting on the earlier of May 22, 2025 or the date of the Issuer's next annual meeting of stockholders, subject to the Reporting Person's continued service through the applicable vesting date.

/s/ Matthew Ruderman, Attorney-in-Fact

05/24/2024

** 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.