FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number: 3235-02											
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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).

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* Musslewhite Robert W				2. Issuer Name and Ticker or Trading Symbol Definitive Healthcare Corp. [DH]								Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Mussie	wnite Ko	bert w			= •					<u> </u>	<u> </u>			X	Direc	tor		10% O	wner
(Last)	(Fir	,	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 04/07/2023							X	below	r (give title v) hief Exec	utive	Other (sbelow)	specify		
C/O DEFINITIVE HEALTHCARE CORP.																mer Exce	utive	Officer	
492 OLD CONNECTICUT PATH, SUITE 401				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ind Line)	Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														X	Form	filed by On	e Rep	orting Pers	on
FRAMINGHAM MA 01701														Form filed by More than One Reporting Person					
(City)	(City) (State) (Zip)						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	n-Deriva	tive S	Secui	rities	Acq	uired,	, Dis	posed of	, or B	enet	iciall	y Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Execution Dat		Date,	Transaction I		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				ities F icially (I d Following (I		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)		ice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Class A Common Stock 04/07/2					2023			F ⁽¹⁾		15,616	D \$		10.47	1,334,777			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)	of 2. 3. Transaction 3A. Deemed Execution Date (Month/Day/Year) if any		emed ion Date,	4. Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Da (Month/Day/Yo		isable and	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. De Se (Ir	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	e s illy	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	Amou or Numb of Share	er					

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.

Remarks:

/s/ Matthew Ruderman, as attorney-in-fact

04/11/2023

** 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.