## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden hours per response: 0.5

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

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

Instruct	tion 10.																		
1. Name and Address of Reporting Person*  Coleman Donald F.						2. Issuer Name and Ticker or Trading Symbol Intapp, Inc. [ INTA ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
														Offic	er (give title		Other (		
(Last) (First) (Middle) C/O INTAPP, INC.						3. Date of Earliest Transaction (Month/Day/Year) 08/23/2024								below) below)  Chief Operating Officer					
3101 PARK BLVD																			
(Street) PALO ALTO CA 94306					4.1	If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person					
(City) (State) (Zip)				-									Form filed by More than One Reporting Person						
(City)	(3		,	on Doriv	/ativ/	- Soc	· · · · ·	ios Ac	auiro	4 Di	isposed o	f or Bo	noficial	v Owne	vd.				
1. Title of S	Security (Ins		ne i - iv	2. Transac		_	Deem		3.	u, Di	4. Securities	-		_	ount of	6. Ow	nership	7. Nature of	
Date (Month/Day/				y/Year)	Execution Date, if any (Month/Day/Year)			Transaction Code (Instr. 8)		Disposed O	f (D) (Instr. 3, 4 and		Securi Benef Owned Repor	icially d Following	(D) or	or Indirect I	Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Transa	ted action(s) 3 and 4)			instr. 4)	
Common Stock 08/23/20									<b>M</b> <sup>(1)</sup>		15,000	A	\$3.99	6	83,239		D		
Common Stock 08/23/20					2024	24			<b>S</b> <sup>(1)</sup>		15,000	D	\$44.026	(2) 6	58,239	D			
Common Stock													1:	50,000	,000		By Gambatte LLC <sup>(3)</sup>		
			Table II								posed of, convertil			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transaction Code (Instr. 8)				6. Date Exercis Expiration Date (Month/Day/Ye		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivativ Security (Instr. 5)		es ally g d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (Right to	\$3.99	08/23/2024				15,000		15,000	(4)	(4) 08/27/2025		Common Stock	15,000	\$0 226		15 D			

## **Explanation of Responses:**

- 1. The option exercise and sale of shares of common stock of Intapp, Inc. was executed pursuant to a 10b5-1 plan put in place by the Reporting Person on March 14, 2024.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$44.00 to \$44.21, inclusive. The reporting person undertakes to provide to Intapp, Inc., any security holder of Intapp, Inc. 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 in this footnote (2).
- 3. Shares held by Gambatte LLC, an entity controlled by and for the sole benefit of the Coleman Family Trust.
- 4. The shares underlying this option are fully vested and exercisable as of the date hereof.

/s/ Brian Grube, Attorney-in-

08/27/2024

\*\* 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.