FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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 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

1. Name and Address of Reporting Person* HALL JOHN T						2. Issuer Name and Ticker or Trading Symbol Intapp, Inc. [INTA]									all appli	licable) tor	ng Perso	_	vner
	(Last) (First) (Middle) C/O INTAPP, INC. 3101 PARK BLVD					3. Date of Earliest Transaction (Month/Day/Year) 02/17/2023								X	belov	,	Other (s below) utive Officer		specify
(Street) PALO ALTO CA 94306 (City) (State) (Zip)					Line)										Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/					ion	on 2A. Deemed Execution Date,			3. 4. Securities		s Acquired (A) or f (D) (Instr. 3, 4 and			5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) oi (D)	Price		Transaction(s) (Instr. 3 and 4)				(111511. 4)
Common Stock 02/17/20)23				A		65,312	A	\$0	\$0 ⁽¹⁾		5,071,750		D	
Common Stock 02/21/20						023			S ⁽²⁾		1,626	D \$37.6		65 ⁽³⁾	5,070,124			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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	eemed Ition Date, h/Day/Year)	4. Transa Code (8)			6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Deri Sec (Ins	rice of vative urity tr. 5)	9. Number 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. The shares of Intapp, Inc.'s (the "Issuer") common stock reported in this Form 4 represent shares earned, as certified by the audit committee of the board of directors of the Issuer on February 17, 2023, based on the level of achievement of the applicable performance conditions over the applicable performance period, in respect of performance share units granted pursuant to the Intapp, Inc. 2021 Omnibus Incentive Plan. The earned shares of Issuer common stock reported in this Form 4 are subject to service-based vesting requirements that lapsed on February 20, 2023.
- 2. Shares of Intapp, Inc. (the "Issuer") common stock sold for tax liability incurred upon the vesting of performance share units granted pursuant to the Intapp, Inc. 2021 Omnibus Incentive Plan.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$37.76, 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 (3).

/s/ Brian Grube, Attorney-in-**Fact**

02/22/2023

** 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.