## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPR	OVAL
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).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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														
1. Name and Address of Reporting Person * Wagner Scott			2. Issuer Name and Ticker or Trading Symbol DoubleVerify Holdings, Inc. [DV]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director 10% Owner Officer (give title below) Other (specify below)					
(Last) (First) (Middle) C/O DOUBLEVERIFY HOLDINGS, INC., 233 SPRING STREET				3. Date of Earliest Transaction (Month/Day/Year) 10/06/2021										
(Street) NEW YORK, NY 10013				4. If Amendment, Date Original Filed(Month/Day/Year)					_X_ I	6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)			(Zip)	Table I - Non-Derivative Securities Acqu					s Acquired,	aired, Disposed of, or Beneficially Owned				
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	Execution Date, if Code		(A) or		of (D) Own Tran	O) Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. 7. Nature Ownership Form: Beneficial Direct (D) Ownership or Indirect (I) (Instr. 4)			
								s who respon						74 (9-02)
			Table II -	Dorivativ	a Sacuri	ios Ac	in this f	orm are not rot rotly valid OMI	equired to a 3 control n	respond ι umber.				/4 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transact	5. Notion of Deri Secu Acque (A) of Disp of (I	arrant nmber vative rities nired or osed	in this t a curre	form are not rently valid OMI  osed of, or Beneral osecurity of the security o	equired to B control no ficially Own	respond unber.  ned  d Amount ying	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transact	5. Notion of Deri Secu Acque (A) of Disp of (I	arrant number vative rities nired or osed 0) r. 3, 4,	in this facurred a curred puired, Dispose, options, co 6. Date Exeritation I (Month/Day)  Date Exercisable	form are not rently valid OMI  osed of, or Beneral osecurity of the security o	7. Title and of Underly Securities (Instr. 3 and	respond unber.  ned  d Amount ying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirec Beneficial Ownershi (Instr. 4)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Wagner Scott C/O DOUBLEVERIFY HOLDINGS, INC. 233 SPRING STREET NEW YORK, NY 10013	X					

### **Signatures**

/s/ Andrew E. Grimmig, as Attorney-in-Fact for Scott Wagner	10/08/2021
**Signature of Reporting Person	Date

### **Explanation of Responses:**

- \* 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).
- (1) Restricted stock units convert into common stock on a one-for-one basis.

(2) Represents time-based restricted stock units granted on October 6, 2021 pursuant to DoubleVerify Holdings, Inc.'s non-employee director compensation program. The restricted stock units vest on October 6, 2022, subject to Mr. Wagner's continued service.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.