SEC Form 4

FORM 4

| UNITED STATES SECURITIES AND EXCHANGE COMMISSION |
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| Markington D.O. 00540 |

Washington, D.C. 20549

OMB APPROVAL

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| STATEMENT | OF CHANGE | S IN BENEFICIA | |
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| | | | |

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 [*] VEZINA ANN F | | | 2. Issuer Name and Ticker or Trading Symbol <u>Concentrix Corp</u> [CNXC] | (Check | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|--|----------|--|-------------------|--|---------------------------------------|--|--|--|--|
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 03/23/2023 | | Director Officer (give title below) | 10% Owner Other (specify below) | | | | |
| 39899 BALENTINE DRIVE | | E | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | 6. Individual or Joint/Group Filing (Check Applic Line) | | | | | |
| (Street) | | | — | X | Form filed by One Re | porting Person | | | | |
| NEWARK | CA | 94560 | | | Form filed by More th Person | an One Reporting | | | | |
| (City) | (State) | (Zip) | Rule 10b5-1(c) Transaction Indication | 1 | | | | | | |
| | | | Check this box to indicate that a transaction was made pursuar satisfy the affirmative defense conditions of Rule 10b5-1(c). Set | | | an that is intended to | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | 4. Securities Disposed Of 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|------------------------------|---|------------------------------------|---------------|-------------------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150. 4) |
| Common Stock | 03/23/2023 | | A ⁽¹⁾ | | 1,482 | A | \$ <mark>0</mark> | 5,294 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | | | (0) 1 | , | , | | | • • | | | | , | | | | | |
|---|---|--|---|------------------------------|---|-----|-----|--|--------------------|--|--|---|--|--------------------------------------|--|--|--|
| 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 any (Month/Day/Year) | 4. Transa Code (8) | | of | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 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 | Amount or Number of Shares | | | | | | |

Explanation of Responses:

1. Represents shares of restricted stock awarded under the 2020 Stock Incentive Plan. The restricted stock vests in full on the earlier of (x) the one-year anniversary of the date of grant and (y) the date of the Issuer's 2024 Annual Meeting of Stockholders.

Remarks:

/s/ Andrew Farwig, Attorney-03/27/2023

in-Fact

** 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.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).