FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPR	OVAL				
OMB Number:	3235-0287				
Estimated average bu	ırden				
hours per response:	0.5				
	OMB Number: Estimated average bu				

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 conditions of Rule 10b5-14(x). See heat write in the conditions of Rule 10b5-14(x).

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(c). Se	ee Instruction 1	0.																	
Name and Address of Reporting Person* Caldwell Christopher A				2. Issuer Name and Ticker or Trading Symbol Concentrix Corp [CNXC]								(Cr	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
				1									Ι.						
(Last) (First) (Middle)			3 Ds	3. Date of Earliest Transaction (Month/Day/Year)								-	√ Dπice below	er (give title	Other (s	specify			
	 ALENTINE	,	viidulo)		04/21/2025								President and CEO						
		DRIVE																	
SUITE 235				4 15	If Amendment, Date of Original Filed (Month/Day/Year)								-	6. Individual or Joint/Group Filing (Check Applicable					
(Street)					4. If A	Ameno	ment,	Date of	Origina	II FIIed	i (Month/Da	y/ Year)	Lin		Joint/Grou	p Filing	(Check A	pplicable
NEWAR	K CA	. 9	4560		1										✓ Form	filed by On	e Repo	rting Perso	on
	K 01		1500		1											filed by Mo	re than	One Repo	orting
(City)	(Sta	ato) (3	Zip)		1											on			
(City)	(30	(2	<u>-ip)</u>																
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	oosed of	, or E	3ene	eficia	lly Own	ed			
1. Title of S	Security (Inst	r. 3)		2. Transa	ction												7. Nature		
Date			Execution			cution Date,		Transaction Disposed Of (D) Code (Instr. 5)		Of (D) ((D) (Instr. 3, 4 and					Form: Direct (D) or Indirect	of Indirect Beneficial		
\(\(\)				(Month/Day/Year)			8)						Following	(l) (Ins	str. 4)	Ownership (Instr. 4)			
							Code	v	Amount	nount (A) or P		Price	Transaction(s)				(
C			04/21/	2025	2025			P		1,000	000 A		\$46	46 303,362			D		
Common Stock 04/21/2				2023				Р		1,000	F	1	φ40	30	3,302		D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
				(e.g., pı	ıts, ca	alls, v	warra	ants,	optior	ıs, c	onvertib	le se	curi	ties)					
1. Title of Derivative	2. Conversion	3. Transaction Date	3A. Dee		4. Transa		of	ımber	Expirati	on Da		Amou	le and		8. Price of Derivative	9. Number derivative	0	0. Ownership	11. Nature of Indirect
				Day/Year)	Code (8)	Code (Instr. 8)		Securities		(Month/Day/Year) Securities Underlyin			rlying		Security (Instr. 5)	Securities Beneficial	ly Direct (D)	Direct (D)	
	Derivative Security					Acquired (A) or			Derivative Security (Ins			nstr.		Owned Following		or Indirect (I) (Instr. 4)			
							Disposed of (D)		3 and 4)			14) `			Reported Transaction(- 1	1		
						(Instr. 3, 4 and 5)									(Instr. 4)	(5)	'		
													Amo	ount					
													or Num	nber					
			Code			Date Expiration Exercisable Date		of Title Shares											
					Soue		(~)	(0)	LAGICIS	able	Date	1100	Julia	163					

Explanation of Responses:

Remarks:

/s/ Andrew A. Farwig, Attorney-in-Fact

04/23/2025

** 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.