FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL 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).

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* FANTE PETER						2. Issuer Name and Ticker or Trading Symbol VERINT SYSTEMS INC [VRNT]								(Check	all app Direc	olicable) ctor	g Person(s) to Issuer 10% Owner Other (specify	
(Last) 175 BRO	(Last) (First) (Middle) 175 BROADHOLLOW ROAD					3. Date of Earliest Transaction (Month/Day/Year) 04/12/2017								X	Officer (give title below) Chief Adminis		below	1)
(Street) MELVIL (City)	MELVILLE NY 11747				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date					te Exec onth/Day/Year) if an			A. Deemed kecution Date, any lonth/Day/Year)		action (Instr.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			l 5)	Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D)	Price		Trans	action(s) 3 and 4)		(111341. 4)
Common Stock 04/12/2					2017				A		2,500(1)	A	\$(\$0		20,987	D	
Common Stock 04/13/20					2017	017					2,190(2)	D	D \$39.19 ⁽³⁾⁽⁴⁾		18,797		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)	if any	emed tion Date, n/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deriv Secu (Instr	vative irity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

- 1. Represents the earned portion of the award, for which the performance conditions for vesting were satisfied on April 12, 2017 based on the Company's level of achievement of specified performance goals for the period from February 1, 2015 through January 31, 2017 and the filing of the Company's Annual Report on Form 10-K for such period.
- $2. \ Amount sold to satisfy applicable tax withholding resulting from the vesting of restricted stock units on April 12, 2017, including those reported on row 1 of Table 1 of this Form 4.\\$
- 3. Represents the weighted average price for sales of the shares. The shares were sold at prices ranging from \$38.75 per share to \$39.70 per share.
- 4. The reporting person will provide to the Securities and Exchange Commission staff, the issuer, or any security holder of the issuer, upon request, full information regarding the number of shares purchased or sold at each separate price.

Remarks:

/s/ Peter D. Fante

04/14/2017

Date

** Signature of Reporting Person

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.