# SEC Form 4

# FORM 4

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

OMB APPROVAL

OMB Number: 3235-028									
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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

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 Addre	ess of Reporting Perso <u>`ER</u>	on*	2. Issuer Name and VERINT SYS		5 ,	(Check	tionship of Reportin all applicable) Director Officer (give title	10% 0			
(Last) 175 BROADHO	(First) OLLOW ROAD	(Middle)	3. Date of Earliest Tr 12/09/2021	ansaction (Mo	nth/Day/Year)	Х	below) Chief Admini	below	)		
(Stroot)			4. If Amendment, Da	te of Original F	iled (Month/Day/Year)	6. Indiv Line)	idual or Joint/Grou	p Filing (Check	Applicable		
(Street) MELVILLE	NY	11747				X	Form filed by On Form filed by Mo				
(City)	(State)	(Zip)	-				Person		,		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1. Title of Security	/ (Instr. 3)	2. Transactio	on 2A. Deemed	3.	4. Securities Acquired (A) or		5. Amount of	6. Ownership	7. Nature		

1. The of Secu	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported		of Indirect Beneficial Ownership (Instr. 4)
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Sto	ck	12/09/2021		S		1,787 <sup>(1)</sup>	D	\$48.82 <sup>(2)(3)</sup>	46,983	D	
Common Sto	ck	12/13/2021		S		1,432(4)	D	\$49.23 <sup>(3)(5)</sup>	45,551	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of		6. Date Exerc Expiration Da (Month/Day/Y	Amount of Securities		8. Price of 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. Amount sold to satisfy applicable tax withholding resulting from the vesting of previously disclosed restricted stock units vested on December 9, 2021.

2. Represents the weighted average price for sales of the shares. The shares were sold at prices ranging from \$48.39 to \$49.16 per share.

3. 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.

4. Amount sold to satisfy applicable tax withholding resulting from the vesting of previously disclosed restricted stock units vested on December 10, 2021.

5. Represents the weighted average price for sales of the shares. The shares were sold at prices ranging from \$48.75 to \$49.60 per share.

### **Remarks:**

## /s/ Peter D. Fante

\*\* Signature of Reporting Person

<u>12/13/2021</u> 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.