FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB AF | PROVAL |
|-------------|----------|
| OMB Number: | 3235-028 |
| | |

37 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

| | | | | | · · · | | (| , | | | | ipariy Act | | | | | | | | | |
|----------------------------------------------------------|--------------------------------------------------------|---------|-----------------------------------------------|---------------------|-------------------------------------------------------------------------|------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------|--------------------------------------------------------------------------------------------|----------|--------------------------------------------|------------------------------------------------------------------------------------------------------------------|---------------|---------------------|---------------------------------------------------------------------------|----------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|--|
| 1. Name and Address of Reporting Person* PARCELL DAVID | | | | | 2. Issuer Name and Ticker or Trading Symbol VERINT SYSTEMS INC [VRNT] | | | | | | | | | | | Check all a | ionship of Reportin all applicable) Director | | rson(s) to Is | | |
| (Last) 241 BRC | (F OKLAND | , | Middle) | | | | of Earl 2007 | iest T | Transa | ction (Mo | onth/[| Day/Year) | | | | A be | ficer (give title low) Managing D | below) Director, EMEA | | | |
| (Street) WEYBR SURREY | X XO X | | XT13 OR | H | 4. If | Ame | endme | nent, Date of Original Filed (Month/Day/Year) | | | | | | | | ne) X Fo | <i>'</i> | | | | |
| (City) | (S | tate) (| Zip) | | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Nor | -Deriva | ative | Se | curit | ies | Acq | uired, | Dis | osed o | f, or | Ben | eficia | ally Ow | ned | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | action Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year | | Date, | Transaction Dispo | | Disposed | rities Acquired (A ed Of (D) (Instr. 3, | | | nd Sec Ben Ow | 5. Amount of Securities Beneficially Owned Following Reported | | wnership m: Direct or Indirect Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Trai | isaction(s) tr. 3 and 4) | | | (111501.4) | |
| Common Stock ⁽¹⁾ 07/0 | | | | | 2/2007 | | | | | A | | 8,500 | | A | \$ | 0 | 16,500 | | D | | |
| Common Stock ⁽²⁾ | | | | 07/02 | 07/02/2007 | | | | A | | 8,000 | | A | \$ | 0 | 24,500 | | D | | | |
| | | Та | nble II - C | | | | | | | | | sed of, onvertib | | | | y Owne | d | | | | |
| 1. Title of Derivative Security (Instr. 3) | Conversion Date Execution or Exercise (Month/Day/Year) | | 3A. Deeme Execution if any (Month/Da | Date, (| Code (Inst | | of | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Numbe of Title Shares | | ount nber | 8. Price of Derivative Security (Instr. 5) | | , | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. Each represents a contingent right to receive one share of Verint common stock. 33% of the award vests on the later to occur of (1) March 15, 2008 and (2)(a) Verint becoming compliant with its reporting obligations under the Securities Exchange Act of 1934, as amended, (the "Exchange Act") and (b) shares of Verint's common stock being listed on one or more established stock exchanges or national market systems, including without limitation The Nasdaq Global Market (the events in clauses (a) and (b) collectively referred to as the "Compliance Event"); 33% on the later of (1) March 15, 2009 and (2) the Compliance Event; and 34% on the later of (1) July 2, 2010 and (2) the Compliance Event.

2. Each represents a contingent right to receive one share of Verint common stock. The award vests (1) 50% on the later to occur of March 15, 2008 and the Compliance Event and (2) 50% on the later to occur of July 2, 2010 and the Compliance Event.

/s/ Peter D. Fante as Attorney 07/05/2007 in Fact for David Parcell

** 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.