FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 2

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	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287		
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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>DIMICK NEIL F</u>				RESOURCES CONNECTION, INC. [ RGP								I '	Ck all appli	,		10% Ov	vner			
(Last) (First) (Middle) 17101 ARMSTRONG AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 01/02/2024								1	Officer below)	(give title		Other (s below)	specify			
1/101 ARMSTRONG AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line)					
(Street) IRVINE	C	<b>A</b> 9	92614											- 1	Form f	•		orting Perso	- 1	
															Persor		o unan	Tone repo	ung	
(City) (State) (Zip) Rule 10I							0b5-	1(c)	Trans	act	ion Ind	licatio	n							
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written p satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										plan t	hat is intende	d to								
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date					Day/Year) Execu		A. Deemed xecution Date, any lonth/Day/Year)		Code (	Transaction Dispose Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 a			Benefici Owned I	es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
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. Deemee Execution I if any (Month/Day	Date,	Code (Inst		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly Di	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	or Ni of	umber						
Phantom Stock	(1)	01/02/2024			A		7,153		(1)		(1)	Commo	n 7	,153	\$0.0	51,204		D		

## **Explanation of Responses:**

1. Award vests 25% after one year and 25% each year thereafter for the next three years. Represents credit of deferred compensation to reporting person's deferred stock account under the Directors Deferred Compensation Plan. Each share of phantom stock is the economic equivalent of one share of common stock. The shares of phantom stock to the extent then-vested become payable in cash to the reporting person upon separation from service as a director in accordance with the reporting person's election under the Directors Deferred Compensation Plan.

> By: /s/ Lauren Elkerson For: Neil Dimick

01/03/2024 \*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.