Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| Washington, | D.C. | 20549 | |
|-------------|------|-------|--|
|-------------|------|-------|--|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | |
|--------------------------|-------|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response | : 0.5 | | | | | | |

| | | | | or Section 30(h) of the | he inves | tment | Company Act of 1 | 1940 | | | | |
|---|-------------------------|---|---|---|----------|---|---|---|---|--|---|--|
| 1. Name and Address of Reporting Person* DUCHENE KATE W | | | 2. Issuer Name and Ticker or Trading Symbol RESOURCES CONNECTION, INC. [| | | | (Che | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| | | | | RGP] | | | | X | | 10% C | | |
| (Last) | (Last) (First) (Middle) | | Date of Earliest Transaction (Month/Day/Year) | | | | X | Officer (give title below) | below | (specify) | | |
| 17101 ARMSTRONG AVENUE | | | 03/16/2023 | | | | | President & CEO | | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | 6. Inc Line) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| IRVINE | CA | 9261 | .4 | | | | | X | , , , | | | |
| (City) | (State) | (Zip) | | | | | | Form filed by More than One Reporting Person | | | | |
| | Ţ | able I - | Non-Derivati | ve Securities A | Cquir | ed, I | Disposed of, | or Bei | neficiall | y Owned | | |
| | | 2. Transaction Date (Month/Day/Year | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and | | | 5. Amount of Securities Beneficially Owned Following Reported | 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 | Transaction(s) (Instr. 3 and 4) | (11150.4) | (111501. 4) | |
| Common Stoc | ·k | | 03/16/2023 | | A | | 1,248.9416 ⁽¹⁾ | A | \$0.0 | 322,401.8032(2) | D | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | |

(e.g., puts, calls, warrants, options, convertible securities)

Date

Exercisable

6. Date Exercisable and

Expiration

Date

Expiration Date

(Month/Day/Year)

5. Number

Derivative

Securities Acquired

(A) or Disposed

of (D) (Instr. 3, 4 and 5)

(A) (D)

Explanation of Responses:

Conversion

or Exercise Price of Derivative

Security

1. Title of Derivative

Security (Instr. 3)

1. Represents dividend equivalent rights accrued on previously awarded restricted stock units which vest proportionately with the units to which they relate.

Code

Transaction Code (Instr.

8)

2. Includes 1,274 shares purchased through the Resources Connection, Inc. Employee Stock Purchase Plan.

By: /s/ Lauren Elkerson For: Kate Duchene

Amount Number

Shares

7. Title and

Amount of

Securities

Underlying

Security (Instr. 3 and 4)

Derivative

Title

8. Price of

Derivative

Security (Instr. 5)

9. Number of

derivative

Securities

Following Reported

Transaction(s) (Instr. 4)

Owned

Beneficially

11. Nature

of Indirect

Beneficial

Ownership (Instr. 4)

Ownership

Form: Direct (D)

or Indirect

(I) (Instr. 4)

03/17/2023

** Signature of Reporting Person Date

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

3A. Deemed

Execution Date.

if any (Month/Day/Year)

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

3. Transaction

(Month/Day/Year)

Date

** 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.