FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

Washington,	D.C.	20549	
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STATEMENT	OF CHANGES II	N BENEFICIAL	OWNERSHIP

OMB APPROVAL

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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*  HARSHMAN PATRICK				2. Issuer Name <b>and</b> Ticker or Trading Symbol HARMONIC INC [ HLIT ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
1171110	111111111111	HITCH												X				10% Ow	· I		
				3. D	ate c	f Earl	iest Tran	saction (Mo	onth/	Day/Year)			X	Officer below)	(give title		Other (s below)	pecify			
(Last)	,	•	(Middle)		05/	15/2	023								,		- and	,			
2590 OF	RCHARD P.	ARKWAY				President and CEO															
(Stroot)					_ 4. If	Ame	ndme	nt, Date	of Original	Filed	I (Month/D	ay/Year)		6. Ind Line)	ividual or	Joint/Group	Filing	g (Check Ap	plicable		
(Street) SAN JOSE CA 95131															X Form filed by One Reporting Person						
	<u> </u>				-								Form filed by More than One Reporting Person								
(City) (State) (Zip)				Bu																	
					\\	Rule 10b5-1(c) Transaction Indication															
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								ed to													
		Tab	le I - No	n-Deriv	vative	Se	curit	ies Ac	quired,	Dis	posed o	of, or B	enefi	icially	Owned						
1. Title of	Security (Ins			2. Trans		_	A. De		3.		·	ities Acqu			5. Amou		6. Ov	vnership	7. Nature		
			Date (Month/		Ex		Execution Date, if any		Transaction Code (Instr.		Disposed Of (D) (Instr. 3,		, 4 and Securitie		es	Form	rm: Direct ) or Indirect	of Indirect Beneficial			
				(	-u,, .ou.	(Month/Day/Year)								Following (I) (		str. 4) (	Ownership (Instr. 4)				
								Code	v	Amount	(A) or (D) Pr		rice	Transac	ansaction(s) str. 3 and 4)			msu. 4)			
Common Stock 05/15/2				5/2023	M 30,238		8 A		\$0.00	00 628,385			D								
Common Stock 05/15/2			5/2023				F		15,92	.0 Г	\$	16.49 611,965 <sup>(1)</sup>			D						
		T	able II -						uired, D						Owned						
	1		1	(e.g., p	outs, c	calls	5, W	arrants	, option	s, c	onverti	ble sec	uriti	es)							
1. Title of Derivative Security (Instr. 3)	perivative Conversion Date Execution Date, security or Exercise (Month/Day/Year) if any		Date,		ransaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		urity	3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)					
					Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amo or Num of Sha	nber							
Restricted Stock Units	\$0.00	05/15/2023			M			16,555	02/15/2022	2 0	2/15/2024	Commor Stock	16,	555	\$0.00	49,665	5	D			
Restricted Stock Units	\$0.00	05/15/2023			M			13,683	02/15/2023	3 0	2/15/2025	Commor Stock	13,	683	\$0.00	95,786		D			

## Explanation of Responses:

1. Reflects an adjustment of 500 shares of common stock transferred to the reporting person's ex-spouse pursuant to a marital settlement agreement. The reporting person no longer reports as beneficially owned any securities owned by his ex-spouse.

## Remarks:

/s/ Laura Donovan By

Attorney-in-Fact: Laura

Donovan

\*\* Signature of Reporting Person Date

05/17/2023

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.