| SEC Form 4 |
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FORM 4

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

OMB APPROVAL

| OMB Number: | 3235-0287 | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| 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)

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 Address of Reporting Person [*] Reaugh Mitzi | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>HARMONIC INC</u> [HLIT] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|--|--|--|---------------------------------------|--|--|------|--|-----|--------------------|---|-----------------------------------|--|--|--|--------------------|--|---|
| (Last) (First) (Middle) 2590 ORCHARD PARKWAY | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/17/2023 | | | | | | | | Officer (give title Other (specify below) below) | | | | | pecify |
| (Street) SAN JOSE CA 95131 (City) (State) (Zip) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 5. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tal | ble I - Non- | Derivativ | ve Se | ecuritie | s Ac | quired, | Dis | posed o | f, or B | eneficia | ally | Owned | | | | |
| Date | | | | 2. Transactio Date (Month/Day/\ | Execution Date | | | Code (Instr. 5) | | | | | 4 and Securitie Benefici | | es For ially (D) Following (I) (| | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code | v | Amount | (A) (D) | or Price | e | Transacti (Instr. 3 a | ction(s) | | | (insti. 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. Deemed Execution Dat if any (Month/Day/Yo | Code | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Am of Securities Underlying Derivative Seci (Instr. 3 and 4) | | 1 | 3. Price of Derivative Security Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s dly g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | . Beneficial Ownership t (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisat | | Expiration Date | Title | Amou or Numb of Share | er | | | | | |

Explanation of Responses:

\$0.00

Restricted

Stock

Units⁽¹⁾

1. Each restricted stock unit represents a contingent right to receive one share of HLIT common stock.

02/17/2023

2. The shares subject to the restricted stock units are scheduled to vest in full on February 15, 2024. Vested shares will be delivered to the reporting person on or immediately following February 15, 2024. **Remarks:**

02/15/2024⁽²⁾

/s/ Laura Donovan By Attorney-in-Fact Laura Donovan

02/21/2023

10,446

D

** Signature of Reporting Person Date

10.446

\$0.00

02/15/2024

Commor

Stock

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

 \ast 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).

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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.