FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

	Check this box if no longer subject
\neg	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* <u>VITALE VIVIAN M</u>						2. Issuer Name and Ticker or Trading Symbol PROGRESS SOFTWARE CORP /MA [PRGS]									ationship of Report k all applicable) Director		10% O		wner	
(Last) (First) (Middle) C/O PROGRESS SOFTWARE CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 07/10/2023									Officer (give title below)		Other (spe below)		specify	
15 WAYSIDE ROAD, SUITE 400						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) BURLINGTON MA 01803														X	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)						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.														
		Table	I - No	n-Deriva	tive S	ecur	rities	Acc	uired,	Dis	posed of	, or E	Benefic	cially	y Owr	ned				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					Execution			Date, Transaction Code (Instr.			4. Securities Acquired (ADisposed Of (D) (Instr. 35)					cially 1	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code V		Amount	(A) (D)	or Pric	e	Reported Transaction(s) (Instr. 3 and 4)					
Common	023			A		3,935(1)	1) A \$		7.19	9 22,043			D							
		Tab	ole II -	Derivativ (e.g., pu										•	Owne	ed				
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		5. Numl of Deriv Secu Acqu (A) of Dispo of (D) (Instr	rative rities nired r osed)	s I		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)			
			Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares									

Explanation of Responses:

1. Represents deferred stock units issued to the Reporting Person by Progress Software Corporation (the "Company") as the fiscal year 2023 equity retainer for the Reporting Person's services as a director of the Company during such period. These deferred stock units were issued in accordance with the Company's FY23 Director Compensation Plan pursuant to the Company's 2008 Stock Option and Incentive Plan and are payable on a one-for-one basis exclusively in common stock on the earlier of a change in control of the Company or the date the Reporting Person terminates service on the board of directors of the Company (the "Board of Directors"). The deferred stock units will vest on the date of the Company's 2024 Annual Meeting of Stockholders, subject to the Reporting Person's continued service on the Board of Directors until such date.

Remarks:

Anthony Folger, Attorney-in-

07/12/2023

<u>Fact</u>

** Signature of Reporting Person Dat

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.