SEC Form 4	
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## FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL	

OMB Number:	3235-0287
Estimated average bu	rden
hours per response:	0.5

to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940	l r	Estimated average burden hours per response: 0.5
1. Name and Address of Reporting Person* Cadambi Sriprasadh	2. Issuer Name and Ticker or Trading Symbol ZoomInfo Technologies Inc. [ ZI ]	5. Relationship of Rep (Check all applicable) Director X Officer (give	10% Owner
(Last) (First) (Middle) C/O ZOOMINFO TECHNOLOGIES INC. 805 BROADWAY STREET, SUITE 900	3. Date of Earliest Transaction (Month/Day/Year) 09/01/2022	below)	below) ccounting Officer
(Street) VANCOUVER WA 98660	4. If Amendment, Date of Original Filed (Month/Day/Year) 09/06/2022	Line) X Form filed by	Group Filing (Check Applicable y One Reporting Person y More than One Reporting
(City) (State) (Zip)			

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	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)		(1150.4)
Common Stock	09/01/2022		F <sup>(1)</sup>		830(2)	D	\$45.42	13,127	D	

	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 Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Number of		of Expiration Date Derivative (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v			Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

## Explanation of Responses:

1. Reflects shares withheld to cover the Reporting Person's tax liability in connection with the vesting of the restricted stock units reported herein.

2. The original Form 4, filed on September 6, 2022, is being amended by this Form 4 amendment solely to correct an administrative error. The original Form 4 reported that 1,726 shares were withheld to cover the Reporting Person's tax liability in connection with the vesting of HSKB Phantom Units reported therein when 830 shares were actually withheld. As a result of this administrative error, the number of shares beneficially owned by the Reporting Person following the corrected transaction reflects a corresponding increase in the number of shares reported as beneficially owned by the Reporting Person as of the time of the transaction.

## **Remarks:**

/s/ Anthony Stark, as Attorney-in-Fact

12/05/2022

\*\* Signature of Reporting Person Date

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.