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**

Washington, D.C. 20549	)
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(b) of the Investment Company Act of 1940

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

					_		( ) -				inpany Act o								
1. Name and Address of Reporting Person*  Marino Mark A.					2. Issuer Name and Ticker or Trading Symbol Rackspace Technology, Inc. [ RXT ]										k all app Direc	nship of Reporting applicable) Director		10% Ov	wner
(Last)	•	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/22/2024								X	Officer (give title below)  Chief Finar		Other (sp below) ncial Officer		specify	
C/O RACKSPACE TECHNOLOGY, INC. 1718 DRY CREEK WAY, SUITE 115					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAN ANTONIO TX 78259-1837				1837										X	X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	(S	tate) (Z	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.										nded to				
		Table	I - No	n-Deriva	tive \$	Secu	rities	Acq	uired	, Dis	posed of	, or E	Benefi	cially	/ Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)				Execution Date,			Date,	3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)					4 and Securi Benefi Owner		cially Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or Pr	ice	Transa	eported ansaction(s) nstr. 3 and 4)			(Instr. 4)
Common	Stock			03/16/2	2024				F <sup>(1)</sup>		12,436	I	)   \$	1.59	.59 235,665			D	
Common Stock 02/22/2					2024				A <sup>(2)</sup>		1,694,149	9 A	\	\$ <mark>0</mark>	1,929,814			D	
		Tal	ole II -								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	/e Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8) S. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)  Amou or Numb of Title Share		unt ber		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

- 1. Represents shares withheld by the Issuer to satisfy withholding tax liability incident to the vesting of restricted stock units in a transaction exempt under Rule 16b-3.
- 2. Grant of restricted stock units ("RSUs") vesting in equal annual installments on the first, second and third anniversaries of the grant date. Each RSU represents the right to receive, at settlement, one share of common stock

## Remarks:

/s/ Sarah Alexander, by power of attorney from Mark Marino

03/19/2024

\*\* 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.