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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* Pechersky Bryan J						2. Issuer Name and Ticker or Trading Symbol UPBOUND GROUP, INC. [UPBD]								(Che	ck all app Direct	onship of Reporting F all applicable) Director Officer (give title		10% O	wner	
(Last) 5501 HE	(Fir	st) (N ΓERS DRIVE	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/24/2023									X	below			Other (specify below) orp Secretary		
(Street) PLANO	TX	7	5024		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line)	Form	or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting				
(City)	(Sta	ate) (Z	Zip)	,												Person				
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or B	Bene	ficial	y Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)				Execution (y/Year) if any		ution Date,		Transaction		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)) or 4 and	5. Amo Securit Benefic Owned Report	ties cially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	Amount	(A) (D)	or P	rice	Transa	Transaction(s) Instr. 3 and 4)			(111511.4)						
COMMON STOCK 02/24/2					2023	023			A		3,787(1)	A		\$0	8,	,847 ⁽²⁾		D		
COMMON STOCK 02/25/2				.023				F		514 ⁽³⁾		\$	25.91	8,	,333 ⁽²⁾		D			
COMMON STOCK 02/24/2				2023				F		264(4)	D	\$	2 <mark>6.7</mark> 8	8,	8,069(2)		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)	erivative Conversion Date Execution Date ecurity or Exercise (Month/Day/Year) if any			ion Date,	n Date, Transacti Code (Ins				6. Date Exerci Expiration Dat (Month/Day/Ye		ite	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		D Sc (II	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	per						

Explanation of Responses:

- 1. Represents restricted stock units which vest annually in one-third increments on February 24 of each of the next three years provided that the reporting person has been continuously employed by the issuer as of each such vesting date.
- 2. Includes shares of common stock and unvested restricted stock units.
- 3. Number of shares withheld to cover taxes with respect to time-based restricted stock units which vested on February 25, 2023 (upon completion of one year of continuous employment from grant date of February 25, 2022).
- 4. Number of shares withheld to cover taxes with respect to time-based restricted stock units which vested on February 26, 2023 (upon completion of two years of continuous employment from grant date of February 26, 2021).

Remarks:

/s/ Bryan Pechersky

02/28/2023

** Signature of Reporting Person

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.