| 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 burden | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

| to Section 16 | i. Form 4 or Form 5 hay continue. See (b). | | Filed pursuant to Section 16(a) of the Securities Exchange Act of 19: | 34 | Estimated avera | 0 | | |
|-------------------------|--|------------------|--|--|--------------------------------------|---------------------------------------|--|--|
| 1. Name and Add | dress of Reporting | Person* | or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol DIGI INTERNATIONAL INC [DGII] | 5. Relationship of (Check all applica | | n(s) to Issuer | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | X Director X Officer (g below) | jive title | 10% Owner Other (specify below) | | |
| 9350 EXCEL SUITE 700 | () | (Mudic) | 11/27/2021 | President and CEO | | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joi Line) | int/Group Filing (0 | Check Applicable | | |
| HOPKINS | MN | 55343 | | Form file | d by One Reporti d by More than O | 0 | | |
| (City) | (State) | (Zip) | | Person | | | | |
| | | Table I - Non-De | erivative Securities Acquired, Disposed of, or Ben | eficially Owned | | | | |

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) | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership 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 | 11/27/2021 | | F | | 6,734 | D | \$22.59 | 334,025.764 | D | |
| Common Stock | 11/28/2021 | | F | | 7,382 | D | \$22.59 | 326,643.764 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | | | (371 | | | | | • * | | | | | | | |
|---|---|--|---|------------------------------|---|-----|-----|--|---|-------|---|--|--|--|--|
| 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) | | | | 6. Date Exerc Expiration Da (Month/Day/Y | 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 | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

/s/ Joshua L. Colburn,

attorney-in-fact for Ronald E. 11/30/2021

Konezny

** 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.