FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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	Washingto	n D.C. 20549	

washington, D.C. 20049	OMB APPE	ROVAL
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

See Ins	truction 10.																			
1. Name and Address of Reporting Person* Rozek Eric					2. Issuer Name and Ticker or Trading Symbol ManpowerGroup Inc. [MAN]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
ROZER LITE															Directo					
					·									1	below)	(give title		Other (s	specify	
(Last)	(F	rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year)								VP, Global Controller						
MANPO	WERGRO	UP INC.			102/	02/14/2025							vi, Glood Contoner							
100 MA1	NPOWER 1	PLACE																		
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							6.	6. Individual or Joint/Group Filing (Check Applicable						
(Street)													Li	Line)						
MILWAU	JKEE W	Τ :	53212											1		,		orting Perso		
														Form filed by More than One Reporting Person					rting	
(City)	(S	tate)	(Zip)																	
		Tah	le I - Non	-Deriv	ative	Se	curitie	s Ac	auired	Disi	nosed (of or Be	nefici	allv	Owner	1				
			1011			_			-	<u> </u>										
1. Title of Security (Instr. 3) 2. Transa Date (Month/D:						Execution Date			, Transaction Dispos Code (Instr. 5)		Dispose	rities Acquired (A) ed Of (D) (Instr. 3,		4 and Securitie Benefici		es For		n: Direct r Indirect	7. Nature of Indirect Beneficial	
						- [(Month/Day/Year		r) 8)		 				Reporte	d i	(I) (IN		Ownership (Instr. 4)	
								Code	v	Amount	(A) c (D)	Price	,	Transac (Instr. 3						
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
		•							, option						wiiou					
1. Title of	2.	3. Transaction	3A. Deeme	н	4.	5. Number 6. Date Exercisable and 7. Title and					d	8. Price of		9. Number of		10.	11. Nature			
Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any			Transa	ransaction of ode (Instr. Derivat			Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (In	erivative ecurity nstr. 5)	derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amoun or Numbe of Shares	r						
Restricted Stock Units ⁽¹⁾	(1)	02/14/2025			A		1,810		(1)		(1)	Common Stock	1,810		\$0	1,810		D		

Explanation of Responses:

1. Award of restricted stock units under the 2011 Equity Incentive Plan of the Company. The restricted stock units will vest 100% on February 14, 2028 and will be settled in shares of ManpowerGroup common stock on a 1 for 1 basis

/s/ Shannon Kobylarczyk

(pursuant to Power of Attorney 02/18/2025 previously filed)

** 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.