FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person Sarin Manish					2. Issuer Name and Ticker or Trading Symbol Sprinklr, Inc. [CXM]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) C/O SPRINKL	(First)	(Mi	iddle)		3. Date of Earliest Transaction (Month/Day/Year) 03/16/2023									X	Officer (give title			Other (specify below)		
29 WEST 35TH STREET, 7TH FLOOR					4. If Amendment, Date of Original Filed (Month/Day/Year)								- 1	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW YORK (City)	NY (State)	10 (Zij	001 p)		X Form filed by One Reporting Person Form filed by More than One Reporting										g Person					
		Та	ble I - No	n-Deri	vativ	e Se	curitie	s Acq	uired, l	Disp	osed of,	, or l	Benefi	cially Ow	ned					
Date				e nth/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 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		
								Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Class A Common Stock 03/10					6/202	3			S ⁽¹⁾	s ⁽¹⁾ 40,417 D		\$10.28(2)	517,208(3)			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)	ivative Conversion Date Execution Date, urity (Instr. 3) or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou Securities Underl Derivative Securi (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficia Owned Following Reported	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title		Amount or Number of Shares		Transaction(s) (Instr. 4)				

Explanation of Responses:

- 1. Represents the number of shares required to be sold to cover the statutory tax withholding obligations in connection with the vesting of the restricted stock units. This sale is mandated by the Issuer's election under its equity incentive plans to require the satisfaction of minimum statutory tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary sale by the Reporting Person.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$10.20 to \$10.39 inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 3. Includes 2,540 shares acquired under the Issuer's employee stock purchase plan on December 15, 2022.

Remarks:

/s/ Jason Minio, Attorney-in-Fact 03/17/2023

** 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.