FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

/ashington,	D.C.	20549	
vasilliyton,	D.C.	20343	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

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*     Bell Diana L.						2. Issuer Name <b>and</b> Ticker or Trading Symbol Corsair Gaming, Inc. [ CRSR ]								(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/08/2023									(give title		Other (s below)		
C/O CORSAIR GAMING INC. 115 N. MCCARTHY BOULEVARD					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person						
(Street)	AS C.	A	95035				4015	4 ( - )	<b>.</b>			Ľ Ľ .				filed by Mor		n One Repo	
(City) (State) (Zip)				$\int_{\Pi}$	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.														
		Tab	le I - No	n-Deriv	ative	Se	curities	s Ac	quired, E	Disp	osed c	of, or B	ene	eficial	ly Owne	d			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Date, Transaction Disposed		Transaction Disposed Of (D) (Instr. 3 Code (Instr. 5)				Benefic Owned	es Formally (D) (Following (I) (I		m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership					
							(A) (D)		Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)					
Common Stock 06/08/				3/2023				A		5,263	(1)	A	\$0	\$0 15,458			D		
		Т							uired, Di , options						Owned	,		,	
Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		3A. Deem Executior if any (Month/Da	Date, Transa Code (I				6. Date Exercisable and Expiration Date (Month/Day/Year)			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		opiration	Title	or No	umber					
Stock Option (Right to	\$18.55	06/08/2023			A		11,211		(2)	06	5/07/2033	Common Stock	1 1:	1,211	\$0	11,211		D	

## **Explanation of Responses:**

- 1. Represents restricted stock units ("RSUs") which shall be fully (100%) vested on the earlier of (i) one year anniversary of June 8, 2023 or (ii) the day preceding the next annual meeting of stockholders following June 8, 2023, subject to the Reporting Person's continued service. Each RSU represents a contingent right to receive one (1) share of the Issuer's common stock upon vesting.
- 2. The stock option shall vest and become exercisable with respect to all (100%) of the shares subject to the option on the earlier of (i) one year anniversary of June 8, 2023 or (ii) the day preceding the next annual meeting of stockholders following June 8, 2023, subject to the Reporting Person's continued service.

/s/ Michael G. Potter, as attorney-in fact for Diana L

06/12/2023

**Bell** 

\*\* 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.