FORM 4	4
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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).

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Response	s)											
1. Name and Address of Reporting Person <sup>*</sup> – KHADER TANVEER			2. Issuer Name and Ticker or Trading Symbol INPIXON [INPX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_Director			
2479 E. BAYSHOI	(First) RE ROAD, SUITE		3. Date of Earliest Transaction (Month/Day/Year) 08/16/2021					Officer (give title below)Oth	er (specify below	v)		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
PALO ALTO, CA	94303											
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)				e, if 3. Transaction Code (Instr. 8)		(A) or Disposed of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	Beneficial	
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in SEC 1474 (9-02) this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Number of		6. Date Exercisab	7. Title and Amount		8. Price of	9. Number of	10.	11. Nature	
Derivative	Conversion	Date	Execution Date, if	Transac	tion	Derivative		Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Securities		(Month/Day/Year)				Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	)	Acquired (A)				(Instr. 3 and 4)		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					or Disposed of					Owned	Security:	(Instr. 4)		
	Security					(D)	-					Following	Direct (D)		
						(Instr. 3, 4,	,						Reported	or Indirect	
						and 5)							Transaction(s)	(I)	
											Amount		(Instr. 4)	(Instr. 4)	
								Date	Expiration		or				
								Exercisable	Date	Lifle	Number				
				Code	V	(A)	(D)				of Shares				
Stock															
Option										G					
(Right to	\$ 1.03	08/16/2021		А		100.000		08/16/2021(1)	08/16/2031	Common Stock	100 000	\$ 0 ( <u>2</u> )	100,000	D	
Buy	\$ 1.05	00/10/2021		11		100,000		06/10/2021	00/10/2001	Stock	100,000	\$0	100,000	D	
Common															
Stock)															
Stock)															

## **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
KHADER TANVEER 2479 E. BAYSHORE ROAD, SUITE 195 PALO ALTO, CA 94303	Х					

### Signatures

/s/ Tanveer Khader	08/18/2021	
Signature of Reporting Person	Date	

# **Explanation of Responses:**

\* 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).

(1) The stock options are fully vested on the date of grant

(2) The stock options are granted under Inpixon's 2018 Employee Stock Incentive Plan, as amended from time to time.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.