## FORM 5

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

OMB APPROVAL						
OMB Number:	3235-0	362				
Estimated average burden						
hours per response						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b). Form 3 Holdings Reported

Form 4 Transactions

Reported

## ANNUAL 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

Name and Address of Reporting Person *     Das Soumya			2. Issuer Name and Ticker or Trading Symbol INPIXON [INPX]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
(Last) 2479 E BAYSHO	(First) ORE ROAD,,	(Middle) SUITE 195	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2021				X_ Officer (give title below) Other (specify below) Chief Operating Officer				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Reporting (check applicable line)  _X_ Form Filed by One Reporting Person			
PALO ALTO, CA 94303								Form Filed by More than One Reporting Person			
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqui				Acqui	ired, 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)	Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)  (A) or Amount (D) Price		of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
Common Stock		06/04/2021		F4	199,507 (1)	` /	\$ 1.83	550,494	D		

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 this form are not required to respond unless the form displays a currently valid OMB control number.

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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.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number	10.	11. Nature	
Derivative	Conversion	Date	Execution Date, if	Transaction	Numl	er	and Expiration	on Date	Amou	ınt of	Derivative	of	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	rlying	Security	Derivative	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative			Secur	rities	(Instr. 5)	Securities	Derivative	Ownership	
	Derivative				Secur	ities			(Instr	. 3 and		Beneficially	Security:	(Instr. 4)	
	Security				Acqu	ired			4)			Owned at	Direct (D)		
					(A) o	r						End of	or Indirect		
					Dispo	sed						Issuer's	(I)		
					of (D)	)						Fiscal Year	(Instr. 4)		
					(Instr							(Instr. 4)			
					4, and	15)									
										Amount					
							D .	T		or					
								Expiration	Title	Number					
							Exercisable	Date		of					
					(A)	(D)				Shares					

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Das Soumya 2479 E BAYSHORE ROAD, SUITE 195 PALO ALTO, CA 94303			Chief Operating Officer				

#### **Signatures**

/s/ Soumya Das	02/11/2022
**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) Represents shares that were withheld by the Issuer as of June 6, 2021, per the election of the reporting person on such date, to satisfy income tax withholding and remittance obligations in connection with the vesting of restricted stock awards previously granted on February 19, 2021 and reported on February 23, 2021.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.