#### FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden

0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

#### STATEMENT OF STANGES IN BENEFICIAL SWILLISHIN OF SECONITIES

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 Responses)  1. Name and Address of Reporting Person - Allen Alicia			Issuer Name <b>and</b> Ticker or Trading Symbol Dynatrace, Inc. [DT]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
1601 TRAPELO RD, SUITE 116				3. Date of Earliest Transaction (Month/Day/Year) 08/16/2022					X Officer (give title below) Other (specify below)  Chief Accounting Officer					
(Street) WALTHAM, MA 02451			4. If Amendment, Date Original Filed (Month/Day/Year)					Individual or Joint/Group Filing (Check Applicable Line)  Form filed by More than One Reporting Person  Form filed by More than One Reporting Person						
(City) (State) (Zip)			Та	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
(Instr. 3)		2. Transaction Date (Month/Day/Year)	•	if Code (Instr. 8)		tion 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Benefic Reporte	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Ownership Form:	7. Nature of Indirect Beneficial	
				(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3	and 4)		` '	Ownership (Instr. 4)
Commor	n Stock		08/16/2022		S <sup>(1)</sup>		947	D	\$ 42.419	95,157	7		D	
	Report on a	separate line	for each class of s	securities beneficia	lly owned o	irect	ly or							
indirectly.	Report on a	separate line		securities beneficia		Per in t dis	rsons wh this form plays a c	are no curren	ot requii tly valid	ed to resp OMB cont	ond unless rol number		ained SE	EC 1474 (9- 02)
1. Title of	2.	3. Transaction Date (Month/Day/	Table II - I ( on 3A. Deemer Execution E (Year) any	Derivative Securit e.g., puts, calls, w	ies Acquire arrants, o	Per in dissed, E cotion 6. an (M	rsons wh this form plays a c	of, or ertible rcisable on Da	Benefic securities   T.    The securities   T	ed to resp OMB cont ially Owne	ond unless trol number and 8. Price of	the form	f 10. Ownersi Form of Derivativ Security Direct (I or Indire	11. Natural of Indire Benefici Owners (Instr. 4

#### **Reporting Owners**

Demonstration Common Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Allen Alicia 1601 TRAPELO RD SUITE 116 WALTHAM, MA 02451			Chief Accounting Officer					

## **Signatures**

/s/ Craig Newfield, by power of	08/17/2022
attorney	00/17/2022

Signature of Reporting Person	Date			
- 3				
	•			

### **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 the number of shares required to be sold by the Reporting Person to cover tax withholding obligations in connection with the vesting of RSUs and PSUs.
- The price reported in Column 4 represents a weighted average price. The shares were sold in multiple transactions at prices ranging from \$42.25 to \$42.42, inclusive.

  (2) 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.

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.