

**NATERA, INC.**  
Reported by  
**SHEENA JONATHAN**

**FORM 4**  
(Statement of Changes in Beneficial Ownership)

Filed 04/26/24 for the Period Ending 04/25/24

|             |  |
|-------------|--|
| Address     | 13011 MCCALLEN PASS<br>BUILDING A SUITE 100<br>AUSTIN, TX, 78753 |
| Telephone   | 650-249-9090   |
| CIK         | 0001604821   |
| Symbol      | NTRA   |
| SIC Code    | 8071 - Services-Medical Laboratories                             |
| Industry    | Healthcare Facilities & Services                                 |
| Sector      | Healthcare   |
| Fiscal Year | 12/31  |

FORM 4

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

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.

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

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

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OMB Number: 3235-0287  
Estimated average burden  
hours per response... 0.5

|  |   |  |
|--|---|--|
| 1. Name and Address of Reporting Person *                        | 2. Issuer Name and Ticker or Trading Symbol       | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)                         |
| Sheena Jonathan  | Natera, Inc. [ NTRA ]                             | <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner                    |
| (Last) (First) (Middle)  | 3. Date of Earliest Transaction (MM/DD/YYYY)      | <input type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) |
| C/O NATERA, INC., 13011<br>MCCALLEN PASS BUILDING A<br>SUITE 100 | 4/25/2024   | CO-FOUNDER   |
| (Street)   | 4. If Amendment, Date Original Filed (MM/DD/YYYY) | 6. Individual or Joint/Group Filing (Check Applicable Line)  |
| AUSTIN, TX 78753   |   | <input checked="" type="checkbox"/> Form filed by One Reporting Person                             |
| (City) (State) (Zip)   |   | <input type="checkbox"/> Form filed by More than One Reporting Person                              |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security<br>(Instr. 3) | 2. Trans. Date | 2A. Deemed<br>Execution<br>Date, if any | 3. Trans. Code<br>(Instr. 8) |   | 4. Securities Acquired (A)<br>or Disposed of (D)<br>(Instr. 3, 4 and 5) |               |         | 5. Amount of Securities Beneficially Owned<br>Following Reported Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr.<br>4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|------------------------------------|----------------|---|------------------------------|---|---|---------------|---------|---|---|---|
|                                    |                |   | Code                         | V | Amount  | (A) or<br>(D) | Price   |   |   |   |
| Common Stock                       | 4/25/2024      |   | S                            |   | 500 (1)   | D             | \$89.55 | 69,082  | I   | By<br>Caraluna<br>1 Trust (2)                                     |
| Common Stock                       | 4/25/2024      |   | S                            |   | 500 (1)   | D             | \$89.55 | 69,082  | I   | By<br>Caraluna<br>2 Trust (2)                                     |
| Common Stock                       |                |   |                              |   |   |               |         | 321,364   | D   |   |

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivate<br>Security<br>(Instr. 3) | 2. Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Trans.<br>Date | 3A. Deemed<br>Execution<br>Date, if any | 4. Trans. Code<br>(Instr. 8) |   | 5. Number of<br>Derivative Securities<br>Acquired (A) or<br>Disposed of (D)<br>(Instr. 3, 4 and 5) | 6. Date Exercisable<br>and Expiration Date |                    | 7. Title and Amount of<br>Securities Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                               | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10. Ownership<br>Form of<br>Derivative<br>Security:<br>Direct (D)<br>or Indirect<br>(I) (Instr.<br>4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|--|--|-------------------|---|------------------------------|---|--|--|--------------------|--|-------------------------------|---|--|---|--|
|  |  |                   |   | Code                         | V |  | Date<br>Exercisable                        | Expiration<br>Date | Title  | Amount or Number of<br>Shares |   |  |   |  |

Explanation of Responses:

- (1) The sale of shares was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on March 13, 2023.
- (2) Held for the benefit of the Reporting Person's minor children. The Reporting Person disclaims beneficial ownership over such securities.

Reporting Owners

| Reporting Owner Name / Address  | Relationships |           |         |            |
|---|---------------|-----------|---------|------------|
|   | Director      | 10% Owner | Officer | Other      |
| Sheena Jonathan<br>C/O NATERA, INC.<br>13011 MCCALLEN PASS BUILDING A SUITE 100<br>AUSTIN, TX 78753 | X             |           |         | CO-FOUNDER |

Signatures

/s/ Tami Chen, Attorney-in-Fact

4/26/2024

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 control number.