FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, D | .C. 20549 |
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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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

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

| 1. Name and Address of Reporting Person* Sangster David  |  |         |        |   |  | 2. Issuer Name and Ticker or Trading Symbol Nutanix, Inc. [ NTNX ] |                           |   |                     |   |                    |  |                        |   | ck all app   | ,   | ng Per                            | son(s) to Is  10% O   | wner     |  |
|--|--|---------|--------|---|--|--|---------------------------|---|---------------------|---|--------------------|--|------------------------|---|--|---|-----------------------------------|---|----------|--|
| (Last)   | ast) (First) (Middle) /O NUTANIX, INC.   |         |        |   |  | 3. Date of Earliest Transaction (Month/Day/Year) 09/16/2020        |                           |   |                     |   |                    |  |                        | X   | below  | below) Chief Opera                                      |                                   | below)  |          |  |
| 1740 TECHNOLOGY DRIVE, SUITE 150   |  |         |        |   | If Amendment, Date of Original Filed (Month/Day/Year)      |  |                           |   |                     |   |                    |  |                        | 6. Individual or Joint/Group Filing (Check Applicable |  |   |                                   |   |          |  |
| (Street)   | Street) SAN JOSE CA 95110  |         |        | /                                       | T. II Americanent, Date of Original Fried (Month/Day/Teal) |  |                           |   |                     |   |                    |  | Line)                  |   |  |   |                                   |   |          |  |
| (City)   | (Sta   | ate) (Ž | Zip)   |   |  |  |                           |   |                     |   |                    |  |                        |   | 1 0130   | , i   |                                   |   |          |  |
|  |  | Table   | I - No | n-Deriva                                | tive S   | Secu   | rities                    | Acq                                     | uired               | , Dis   | posed of           | , or E   | Bene                   | ficial  | ly Own   | ed  |                                   |   |          |  |
| 1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)   |  |         |        |   | Execution Date   |  | Date,                     | 3.<br>Transaction<br>Code (Instr.<br>8) |                     | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 5) |                    |  | 4 and Securi<br>Benefi |   | cially<br>I Following  | Form<br>(D) or  | : Direct<br>r Indirect<br>str. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |          |  |
|  |  |         |        |   |  |  |                           |   | Code                | v   | Amount             | (A)<br>(D)   | (A) or (D)             |   | Transa   | nsaction(s)<br>str. 3 and 4)                            |                                   |   | (1130.4) |  |
| Class A Common Stock 09/16/2   |  |         |        | 2020                                    |  |  |                           | S                                       |                     | 14,656(1)   | Г                  | ) {  | <b>522</b> .84         | 76,810  |  |   | D                                 |   |          |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |         |        |   |  |  |                           |   |                     |   |                    |  |                        |   |  |   |                                   |   |          |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any |         |        | 4.<br>Transaction<br>Code (Instr.<br>8) |  | of<br>Deriv  | r<br>osed<br>)<br>r. 3, 4 | Expirat                                 | ion Da              | xercisable and<br>on Date<br>lay/Year)                      |                    | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Ins<br>3 and 4) |                        | Price of erivative ecurity nstr. 5)                   | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | Owners<br>Form:<br>Direct (I<br>or Indire<br>(I) (Instr | Ownership                         | Beneficial<br>Ownership<br>(Instr. 4)                             |          |  |
|  |  |         |        |   | Code   | v  | (A) (D)                   |   | Date<br>Exercisable |   | Expiration<br>Date | Numb<br>of<br>Title Share  |                        |   |  |   |                                   |   |          |  |

## **Explanation of Responses:**

1. Represents shares sold to cover the tax liability arising from the vesting of Reporting Person's Restricted Stock Units, or RSUs.

## Remarks:

/s/ Olive Huang, by power of attorney

09/18/2020

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.