FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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

Name and Address of Reporting Person* Sangster David							2. Issuer Name and Ticker or Trading Symbol Nutanix, Inc. [NTNX]								all applic	hip of Reporting Pe pplicable) ector ïcer (give title		erson(s) to Issuer 10% Owner Other (specify		
	(Last) (First) (Middle) C/O NUTANIX, INC. 1740 TECHNOLOGY DRIVE, SUITE 150						3. Date of Earliest Transaction (Month/Day/Year) 06/29/2017								below)			below)	pechy	
(Street) SAN JOS (City)	SAN JOSE CA 95110 City) (State) (Zip)				_	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	·					
		Tab	le I - I	Non-Deri	ivativ	e Sec	curit	ies A	cquir	ed, D	isposed o	f, or B	enefici	ally (Owned					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					if any	ution	d Date, y/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Benefic Owned		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	action(s)			(Instr. 4)	
Class A Common Stock 06/29/201						7			M		27,000	A	\$3.	3.2		9,000		D		
Class A Common Stock 06/29/201					2017	17					26,800(1)	D	\$19.89	8923 ⁽²⁾ 10		2,200		D		
Class A Common Stock 06/29/201					2017	7			S		200(1)	D	\$20.5	20.54 ⁽³⁾		02,000		D		
		7	Table								sposed of, , convertil				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code (8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares	er						
Employee Stock Option (right to	\$3.2	06/29/2017			M			27,000	((4)	05/19/2024	Class A Commor Stock	27,00	00	\$0	313,00	0	D		

Explanation of Responses:

- 1. The sale reported was effected pursuant to the Reporting Person's 10b5-1 Plan.
- 2. The price reported is a weighted average price. These shares were sold in multiple transactions at sale prices ranging from \$19.51 to \$20.49. The Reporting Person undertakes to provide the full information regarding the number of shares sold at each separate price upon further request.
- 3. The price reported is a weighted average price. These shares were sold in multiple transactions at sale prices ranging from \$20.53 to \$20.55. The Reporting Person undertakes to provide the full information regarding the number of shares sold at each separate price upon further request.
- 4. The option is subject to an early exercise provision and is immediately exercisable. Shares subject to the option vest in 48 equal monthly installments beginning on May 1, 2015.

Remarks:

/s/ Olive Huang, by power of

attornev

** 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 Number.