FORM 4

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

Washington, [	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIA	L OWNERSHIP
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OMB APP	ROVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours per response: 0.								

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

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*  TEMPLETON MARK B				2. Issuer Name and Ticker or Trading Symbol Nutanix, Inc. [ NTNX ]							(Ch	Relationship neck all app X Direc	licable)	ng Per	rson(s) to Is 10% Ov				
(Last)	(Fir	st) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/08/2023								Office below	er (give title v)		Other (s below)	specify		
C/O NUTANIX, INC. 1740 TECHNOLOGY DR., SUITE 150				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable)  X Form filed by One Reporting Person				.			
(Street) SAN JOSE CA 95110				Dula 10hE 1(a) Transaction Indication									Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Z	Zip)		$ _{\square}$	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Ir							to a co	a contract, instruction or written plan that is intended to struction 10.					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)				Exec ay/Year) if any		Deemed cution Date, y nth/Day/Year)		3. 4. Securitie Transaction Code (Instr. 8) 5,		es Acquired (A) o Of (D) (Instr. 3, 4		(A) or 3, 4 an	Benefic	ties cially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A)	or	Price	Transa	ection(s) 3 and 4)			(Instr. 4)
Class A C	Common Sto	ock		12/08/2	2023			A		6,088(1)	) A \$0		\$ <mark>0</mark>	0 21,477 <sup>(2)</sup>			D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	ve Conversion Date Execution Date, Tran Code		Transa Code (	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		nstr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V		(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber					

## **Explanation of Responses:**

- 1. Reflects shares that the Reporting Person will receive upon the settlement of restricted stock units ("RSUs"), which will vest in full on the earlier of (i) the day prior to the next annual meeting of the Issuer's shareholders held after the date of grant or (ii) the one-year anniversary of the date of grant, in each case, subject to the Reporting Person continuing to provide service to the Issuer through the applicable vesting date. Each RSU represents a contingent right to receive one share of Issuer's Class A common stock.
- 2. The amount reported includes 6,088 unvested RSUs, which are issuable into shares of the Issuer's Class A common stock upon vesting.

/s/ Raymond Hum, Attorney 12/12/2023 in Fact

\*\* 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.