FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Check this box if no longer subject to Section 16. Form 4 or Form 5 | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
|--|--|
| obligations may continue. See Instruction 1(b). | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |

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* Pandey Dheeraj | | | | | | 2. Issuer Name and Ticker or Trading Symbol Nutanix, Inc. [NTNX] | | | | | | | | | ck all app Direc | ctor | | 10% (| Owner | | |
|--|--|--|---|---------|--|--|---|------|---|--------|--|---|---|----------|--|--|---|--|--|--|--|
| (Last) (First) (Middle) C/O NUTANIX, INC. 1740 TECHNOLOGY DRIVE, SUITE 150 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/17/2019 | | | | | | | | | | X Officer (give title below) CEO and Chairman | | | | | |
| (Street) SAN JOS (City) | Street) SAN JOSE CA 95110 | | | | - 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| | | Tabl | e I - No | on-Deri | vative | Sec | uritie | s Ac | quired | l, Dis | sposed o | f, or E | Benefic | ially | / Owne | ed | | | | | |
| | | | | Date | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acq Disposed Of (D) (5) | | Acquired (A) or (D) (Instr. 3, 4 and | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) ((D) | Price | | Transac | saction(s) r. 3 and 4) | | | (mourly | | |
| Class A Common Stock | | | | 06/17/ | 06/17/2019 | | | | | | 7,622(1) | D \$25 | | .97 | 241,714 | | | D | | | |
| Class A Common Stock | | | | | | | | | | | | | | | 8,077 | | | | See Footnote ⁽²⁾ | | |
| | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deel Execution if any (Month/I | | 4. Transaction Code (Instr. 8) | | | | 6. Date Expirati (Month/ | ion Da | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | De Se | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficiall 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 Exercis | able | Expiration Date | Title | Amount or Number of Shares | | | | | | | | |

Explanation of Responses:

- 1. Represents shares sold to cover the tax liability arising from the vesting of Reporting Person's Restricted Stock Units.
- 2. The shares are held of record by The Pandey Revocable Trust for which the Reporting Person and his spouse serve as trustees.

Remarks:

/s/ Duston Williams, by power <u>of attorney</u>

06/19/2019

** 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.