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FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	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

Name and Address of Reporting Person*     Sheppard Teresa Gayle				2. Issuer Name and Ticker or Trading Symbol Nutanix, Inc. [ NTNX ]								lationship of Reportin k all applicable) Director		ng Per	rson(s) to Is 10% Ov				
(Last)	(Fir	st) (M	/liddle)		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 <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person							
(Street) SAN JOS	SE CA	<b>A</b> 9	5110		D./	Form filed by More than One Reporting Person										orting			
(City)	(Sta	ate) (Z	ľip)		Rule 10b5-1(c) Transaction Indication  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.								nded to						
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or I	3ene	ficial	ly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			Exec		Deemed cution Date, ny nth/Day/Year)				es Acquired (A) Of (D) (Instr. 3,			Benefic Owned	ies cially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A)	or F	Price Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Class A C	Class A Common Stock 12/08			12/08/	2023		A		6,088(1)	) A S		\$ <mark>0</mark>	22,254(2)			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)	vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any		on Date,	4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr	rities lired r osed ) r. 3, 4	Expiration Date		te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		D S (I	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		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	Amou or Numb of Share	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.