FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See

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* Sinha Amit					2. Issuer Name and Ticker or Trading Symbol Zscaler, Inc. [ZS]								Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Sillid Allit								-	-					X	Direc	ctor		10% (Owner
					_									X	Offic belov	er (give title		Other below	(specify
(Last)	`	,	Middle	2)		3. Date of Earliest Transaction (Month/Day/Year)										w) esident of	D &-D 21		·
C/O ZSCALER, INC.				12/	12/20/2019									PI	esidelit of	K&D al	ia CT		
110 ROSE ORCHARD WAY																			
					- 4. I1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable				
(Street)														Line)	Eorn	n filed by On	e Penorti	na Dar	con
SAN JOS	SE C.	A 9	95134											Λ	, , ,				
-					-										Form filed by More than One Reporting Person				Jorung
(City)	(S	tate) (Zip)																
		Tabl	e I -	Non-Deriv	ative/	Sec	uritie	s Ac	cquir	ed, C	Disposed o	of, or I	Benefic	ially	Owne	ed			
Date			2. Transaction Date (Month/Day/	Year)	Execution Date,		te,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Follow		ties cially I Following	Form: D	n: Direct or Indirect	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Price			ted action(s) 3 and 4)			(Instr. 4)	
Common Stock 12/20/201				19				S		7,000	D	\$48.59	71 ⁽¹⁾	28	289,749			See footnote ⁽²⁾	
Common	Stock													126,748 D					
Common Stock														566,702		I		See footnote ⁽³⁾	
	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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any		4. Transa Code (8)		on of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			iration nth/Day	y/Year) Securities Underlying Derivative Security (Instr. : and 4) Amount or Number of		t r		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owi Fori Dire or Ii (I) (I	nership n: ct (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$48.06 to \$49.00, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 2. The shares are held of record by the ADRR Trust for which Neha Kumar serves as trustee.
- 3. The shares are held of record by the Sinha Revocable Trust dated September 24, 2011 for which the reporting person serves as trustee.

Remarks:

/s/ Torrie Nute, by power of

12/20/2019

attorney

** Signature of Reporting Person

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.