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
Instruction 1(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 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* Sinha Amit					2. Issuer Name and Ticker or Trading Symbol Zscaler, Inc. [ZS]										ip of Reporting Person(s) to Issuer plicable) ctor 10% Owner				
														X		er (give title		ner (specify	
(Last) (First) (Middle) C/O ZSCALER, INC. 110 ROSE ORCHARD WAY						3. Date of Earliest Transaction (Month/Day/Year) 01/03/2019								Λ	CTC	,	be f Eng/Clou	ow) d Ops	
					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) SAN JOSE CA 95134													Line)						
	, C														Form filed by More than One Reporting Person			Reporting	
(City)	(St	ate) (Zip)												1 013	011			
		Tabl	eI-	Non-Deriv	ative	Sec	uritie	s Ac	quir	ed, C	Disposed o	of, or I	3enefi	cially	Owne	ed			
Date		2. Transaction Date (Month/Day/	Year)	Execution Date,		e,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5)	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect t Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock			01/03/20	01/03/2019				S ⁽¹⁾		2,700	D	\$39.01	193 ⁽²⁾	1,0	57,054	I	See footnote ⁽³⁾		
Common Stock			01/03/2019					S ⁽¹⁾		2,107	D	\$39.57	733(4)	1,054,947		I	See footnote ⁽³⁾		
Common	ommon Stock														12	126,562			
Common	Stock													421,05			Ι	See footnote ⁽⁵⁾	
		Та	ble I								sposed of, , convertil				wned				
Derivative Security Conversion Date Execution Date, (Month/Day/Year) if any				ransaction of ode (Instr. Derivative		ative rities ired sed	Expiration Date (Month/Day/Year)			Amount of Securities		Der Sec (Ins		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership ct (Instr. 4)			
					Code	v	(A)	(D)	Date Exer	cisable	Expiration e Date	Title	or Numbe of Shares						

Explanation of Responses:

- $1. \ The \ sale \ reported \ in \ this \ Form \ 4 \ was \ effected \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ on \ June \ 29, \ 2018.$
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$38.46 to \$39.43, 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 ranges set forth in footnotes (2) and (4) to this Form 4.
- 3. The shares are held of record by the Sinha Revocable Trust dated September 24, 2011 for which the reporting person serves as trustee.
- 4. The price reported in Column 4 is weighted average price. These shares were sold in multiple transactions at prices ranging from \$39.46 to \$39.73, inclusive.
- 5. The shares are held of record by the ADRR Trust for which Neha Kumar serves as trustee.

Remarks:

/s/ Torrie Nute, by power of attorney 01/9

** Signature of Reporting Person

01/07/2019

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.