

FORTINET INC

Reported by **JENSEN KEITH**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 08/09/17 for the Period Ending 08/08/17

Address 899 KIFER ROAD

SUNNYVALE, CA 94086

Telephone 408-235-7700

CIK 0001262039

Symbol FTNT

SIC Code 3577 - Computer Peripheral Equipment, Not Elsewhere Classified

Industry IT Services & Consulting

Sector Technology

Fiscal Year 12/31



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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *					2.]	2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Jensen Keitl	ı				FO	ORT	TINE	ΓINC [FT	NT]								
(Last)	(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)							Director 10% Owner					
													X Officer (give title below) Other (specify below) Chief Accounting Officer					
C/O FORTINET, INC., 899 KIFER						8/8/2017							Cinei Accoun	iting Oili	cei			
ROAD																		
	(Stre	eet)			4.]	If An	nendme	ent, Date C)rigi	nal Fil	ed (MM/D	D/YYY	YY)	6. Individual of	or Joint/G	roup Filing	(Check Appl	icable Line)
SUNNYVALE, CA 94086												X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(C	(City) (State) (Zip)										Form fred by More than One Reporting Person							
			Table l	I - Noi	n-Dei	rivat	ive Sec	urities Ac	quii	red, Di	sposed o	f, or	Bene	eficially Owne	ed			
1. Title of Security (Instr. 3) 2. Trans.				Date 2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	de	4. Securities According Disposed of (Instr. 3, 4 and 5)			Fc	Amount of Securit ollowing Reported instr. 3 and 4)	ities Beneficially Owned Transaction(s)		Ownership of Form:	7. Nature of Indirect Beneficial Ownership		
								Code	V	Amoun	(A) or (D)	Price	e				or Indirect (I) (Instr. 4)	
Common Stock 8/8/2017				17	7				950	D	\$36.6	7	1315		D			
Common Stock				8/9/20	17			S (1)		900	D	\$36.2	5		415		D	
	Tab	le II - Der	ivative	Secur	ities l	Bene	ficially	Owned (e.g.	, puts,	calls, wa	arrar	nts, o	options, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deer Execution Date, if a	n (Instr. 8		Acquire Dispose		ive Securities ed (A) or		Date Exercisable and Expiration Date						derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security				Code	v	(A)	(D)	Dat Exe	e ercisable	Expiration Date	Title	Amor	ount or Number of es		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

(1) The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on August 30, 2016.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Jensen Keith C/O FORTINET, INC. 899 KIFER ROAD SUNNYVALE, CA 94086			Chief Accounting Officer					

Signatures

/s/ Robert Turner, by power of attorney	8/9/2017			
**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 control number.