## 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(b).

## 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

1. Name and Address of Reporting Person*  GOLDMAN KENNETH A							2. Issuer Name and Ticker or Trading Symbol FORTINET INC [ FTNT ]								5. Relationship of Report (Check all applicable) Director Officer (give title			suer wner specify
(Last) (First) (Middle) C/O FORTINET, INC. 1090 KIFER ROAD						3. Date of Earliest Transaction (Month/Day/Year) 09/29/2011								X Onlear (give title Other (specify below)  VP & Chief Financial Officer				
(Street) SUNNYVALE CA 94086					_ 4. l	f Amer	ndmer	nt, Date	te 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				
(City)	(S		(Zip)															
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye					on	2A. Deemed Execution Date			3. Transa Code ( 8)	ction	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		'. Nature of ndirect Beneficial Ownership Instr. 4)
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)			1115(1.4)
Common Stock 09/29/201					011	1			M		4,000	A	\$3.735	4,	4,000			See ootnote <sup>(1)</sup>
Common Stock 09/29/201					011	1			S <sup>(2)</sup>		3,900	D	\$16.5736	(3)	100		1 1	See cootnote <sup>(1)</sup>
Common Stock 09/29/201					011	1		S <sup>(2)</sup>		100	D	\$17.26		0		1 1	See cootnote <sup>(1)</sup>	
		7	able						•	,	sposed of , converti	•		y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)				Expir	te Exer ation D th/Day/		And 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4		8. Price of Derivative Security (Instr. 5)			10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares	per				
Employee Stock Option (right to	\$3.735	09/29/2011			M			4,000	(	(4)	01/28/2016	Common Stock	4,000	\$0	68,00	00	I	See footnote <sup>(1)</sup>

## **Explanation of Responses:**

- 1. The securities are held directly by G.V. Partners, L.P. for which the Reporting Person serves as the managing member.
- 2. The sale reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on November 22, 2010.
- 3. The sale price reported in column 4 of Table I represents the weighted average sale price of the shares sold ranging from \$16.14 to \$17.04 per share. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price.
- 4. One-fourth of the shares subject to the option vested on January 28, 2010 and one forty-eighth of the shares vest monthly thereafter.

/s/ John Whittle, by power of

09/30/2011

\*\* 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.