FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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: 3235-028												
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* <u>STAVRIDIS JAMES G.</u>						2. Issuer Name and Ticker or Trading Symbol Fortinet, Inc. [FTNT]									ationship k all appli Directo	cable)	g Per	son(s) to Iss 10% Ov		
(Last)	st) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 09/30/2023									(give title		Other (s below)	specify	
C/O FORTINET, INC. 899 KIFER ROAD						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street)	VALE C	A	94086		Di	ر مار	IOhE	1/0	\ Trans		ion In	dication			Form to Person		e thai	n One Repo	rting	
(City) (State) (Zip)						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.														
		Tab	le I - Noi	n-Deriv	ative/	Sec	uritie	es Ac	quired,	Dis	osed	of, or Be	nefic	ally	Owne	t				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date			Code (I	Transaction Disposed Code (Instr. 5)			rities Acquired (A) o ed Of (D) (Instr. 3, 4 a			es For ially (D) Following (I) (n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) o (D)	r Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 09/30/									M ⁽¹⁾	M ⁽¹⁾		6 A \$0.0		.00	7,592			D		
		Т	able II -									, or Ben ible sec			wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution D if any (Month/Day/	Date,	Date, Transac Code (I		of Deriv	vative irities ired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			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 Exercisabl		xpiration ate	Title	Amour or Number of Shares	er						
Restricted Stock Units	\$0.00 ⁽²⁾	09/30/2023			M ⁽¹⁾			826	(3)		(4)	Common Stock	826		\$0.00	2,481		D		

Explanation of Responses:

- $1.\ Vesting\ of\ restricted\ stock\ units\ ("RSUs")\ granted\ to\ the\ Reporting\ Person\ on\ August\ 17,\ 2023.$
- 2. Each RSU represents a contingent right to receive one share of the Issuer's common stock upon settlement.
- 3. The RSUs will vest in substantially equal increments on each of September 30, 2023, December 31, 2023, March 31, 2024, and the earlier of (i) June 30, 2024 and (ii) the date immediately preceding the Issuer's 2024 annual meeting of stockholders, subject to the Reporting Person's provision of services to the Issuer on each vesting date. Shares of the Issuer's Common Stock will be delivered to the Reporting Person following vesting.
- 4. RSUs do not expire; they either vest or are canceled prior to vest date.

Remarks:

/s/ Robert Turner, by power of attorney

** Signature of Reporting Person Date

10/02/2023

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.