## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

C. 20549

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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*      Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol Fortinet, Inc. [ FTNT ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Xie Kei	<u>n</u>				1	Tunc	<u>t, 1110</u>	<u> </u>		J				X Director 10% Owner					
(Last)	(F	First) (	Middle	)	3. [	3. Date of Earliest Transaction (Month/Day/Year)								X	Offic below	er (give title w)	Othe belo	er (specify w)	
C/O FORTINET, INC.						05/21/2019								President & CEO					
899 KIFER ROAD																			
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line)  X Form filed by One Reporting Person					
SUNNY	VALE C	A S	94086												,	e than One R			
(City)	(5	State) (	Zip)												Pers	son			
(=:9)																			
		Tabl	e I - I	Non-Deriv	vative	Sec	uritie	s A	cquir	ed, D	isposed o	-		ally (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y					Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at					nd 5) Secu Bene Owne		ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 05/21/					019	19			S <sup>(1)</sup>		8,000(2)	D	\$82.58	328 <sup>(3)</sup> 12		,521,600	D		
	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)	2. Conversior or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execu if any	3A. Deemed Execution Date,		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ate Exer ration I ath/Day		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			vative ( irity : r. 5)   1	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
						 			Date		Expiration		Amount or Number of						

## **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 31, 2018.
- $2. \ Represents the aggregate of sales effected on the same day at different prices.$
- 3. Represents the weighted average sales price per share. The shares sold at prices ranging from \$82.07 to \$82.95 per share. Full information regarding the number of shares sold at each price shall be provided upon request to the staff of the U.S. Securities and Exchange Commission, the Issuer, or a security holder of the Issuer.

/s/ John Whittle, by power of <u>attorney</u>

05/22/2019

\*\* 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.