FORTINET INC Form 4 July 01, 2014

FORM 4

OMB APPROVAL OMB

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

3235-0287 Number: January 31, Expires:

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

2005 Estimated average burden hours per response... 0.5

Section 16. Form 4 or Form 5 obligations may continue. See Instruction

Check this box

if no longer

subject to

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * Whittle John | | | 2. Issuer Name and Ticker or Trading Symbol FORTINET INC [FTNT] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|--|----------|----------|---|--|--|--|--|
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction | (Check all applicable) | | | |
| | | | (Month/Day/Year) | Director 10% Owner | | | |
| C/O FORTINET, INC., 1090 KIFER ROAD | | 90 KIFER | 06/30/2014 | X Officer (give title Other (specify below) VP Corp Dev&Strat Alliance,GC | | | |
| | (Street) | | 4. If Amendment, Date Original | 6. Individual or Joint/Group Filing(Check | | | |
| SUNNYVALE, CA 94086 | | | Filed(Month/Day/Year) | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |

| (City) | (State) | Zip) Table | e I - Non-D | erivative S | Securit | ties Acq | uired, Disposed o | f, or Beneficial | ly Owned |
|--------------------------------------|---|---|--|-------------|---------|------------|--|--|---|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transactio Code (Instr. 8) | (Instr. 3, | sposed | of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock | 06/30/2014 | | M(1) | 13,542 | A | \$ 8.43 | 22,982 | D | |
| Common Stock | 06/30/2014 | | S <u>(1)</u> | 21,032 | D | \$ 25 | 1,950 | D | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amoun Underlying Securiti (Instr. 3 and 4) | |
|---|---|--------------------------------------|---|--|---|--------|--|--------------------|---|-----------------------------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amou or Numl of Sh |
| Non-qualified Stock Option (right to buy) | \$ 8.43 | 06/30/2014 | | M(1) | | 13,542 | (2) | 02/10/2017 | Common Stock | 13,5 |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Whittle John C/O FORTINET, INC. 1090 KIFER ROAD SUNNYVALE, CA 94086

VP Corp Dev&Strat Alliance,GC

Signatures

/s/ John Whittle 07/01/2014

**Signature of Person

Date

Explanation of Responses:

- * 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).
- (1) The transactions reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on November 13, 2013.
- (2) 1/4 of the shares subject to the option vested on February 10, 2011 and 1/48 of the shares subject to the option vested monthly thereafter. Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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