FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to 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 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* Mulhall Christopher M. | | | 2. Issuer Name and Ticker or Trading Symbol Fortive Corp [FTV] | | ionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner Officer (give title Other (specify | | | | | | | | |
|--|-------------|----------|--|-----------|---|--------------------|--|--|--|--|--|--|--|
| (Last) 6920 SEAWAY B | (First) LVD | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 05/15/2020 | | VP - Chief Account | below) ing Officer | | | | | | | |
| (Street) EVERETT | WA | 98203 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indivi | dual or Joint/Group Filing (C Form filed by One Reporti Form filed by More than C | ng Person | | | | | | | |
| (City) | (State) | (Zip) | | | | | | | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transac Code (li 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|---------------------------------|---|---|---------------|---------|--|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | (Instr. 3 and 4) | | (111511. 4) |
| Common Stock | 05/15/2020 | | F | | 13(1) | D | \$55.25 | 9,434 | D | |
| Common Stock | | | | | | | | 2,363 | I | By Spouse |
| Common Stock | | | | | | | | 524(2) | I | By 401 (k) |
| Common Stock | | | | | | | | 851 ⁽²⁾ | I | By Spouse's 401 (k) |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | | Derivative | | Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | Derivative Security (Instr. 5) | derivative Securities Beneficially Owned Following Reported | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
|--|--|---|--|---|---|--|------------|--|-----------------|--|--|--|--------------------------------------|---|---|--|---------------------|--------------------|-------|----------------------------------|--------|
| | | | | | | | | | | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | r (I |

Explanation of Responses:

- 1. This transaction relates to the aggregate withholding of shares for tax purposes in connection with the vesting and distribution of previously granted RSUs.
- 2. Based on plan statement dated as of April 30, 2020.

Remarks:

<u>Daniel B. Kim, as attorney-in-fact</u> <u>05/18/2020</u>

** 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.