FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

| OMB Number:              | 3235-0104 |
|--------------------------|-----------|
| Estimated average burden |           |
| hours per response:      | 0.5       |

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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*     Hayes Rejji P |                                             |       | 2. Date of Event Requiring<br>Statement (Month/Day/Year)<br>12/06/2020 | 3. Issuer Name and Ticker or Trading Symbol Fortive Corp [ FTV ]                                                                                                       |  |                             |                                                                                                                                         |  |
|---------------------------------------------------------|---------------------------------------------|-------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|--|
| (Last)<br>6920 SEAWAY                                   | (Last) (First) (Middle)<br>6920 SEAWAY BLVD |       | ,                                                                      | Relationship of Reporting Person(s) to Issuer (Check all applicable)      Director 10% Owner     Officer (give title below) below)      Director Other (specify below) |  | 10% Owner<br>Other (specify | 5. If Amendment, Date of Original Filed (Month/Day/Year)                                                                                |  |
| (Street) EVERETT                                        | WA                                          | 98203 |                                                                        |                                                                                                                                                                        |  |                             | 6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting |  |
| (City)                                                  | (State)                                     | (Zip) |                                                                        |                                                                                                                                                                        |  |                             | Person                                                                                                                                  |  |

## Table I - Non-Derivative Securities Beneficially Owned

| Indirect (I) (Instr. 5) | 1. Title of Security (Instr. 4) | 2. Amount of Securities<br>Beneficially Owned (Instr. 4) | 3. Ownership<br>Form: Direct (D) or<br>Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|-------------------------|---------------------------------|----------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------|
|-------------------------|---------------------------------|----------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------|

## Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable<br>Expiration Date<br>(Month/Day/Year) |                    | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) |                                     | Conversion or Exercise                    | Form: Direct (D) or | 6. Nature of Indirect<br>Beneficial Ownership<br>(Instr. 5) |
|--------------------------------------------|------------------------------------------------------------|--------------------|-----------------------------------------------------------------------------|-------------------------------------|-------------------------------------------|---------------------|-------------------------------------------------------------|
|                                            | Date<br>Exercisable                                        | Expiration<br>Date | Title                                                                       | Amount<br>or<br>Number<br>of Shares | Price of Indirect (I) Derivative Security |                     |                                                             |

Explanation of Responses:

Remarks:

No securities are beneficially owned.

Daniel B. Kim, attorney-in-fact 12/07/2020

\*\* Signature of Reporting Person Date

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

POWER OF ATTORNEY

Know all by these presents that the undersigned hereby constitutes and appoints Daniel B. Kim, signing singly, the undersigned's true and lawful attorney-in-fact to:

(1) execute for and on behalf of the undersigned, in the undersigned which may be necessary or desirable to complete and execute any such Form3, 4, or 5, complete and execute any such Form3, 4, or 5, complete and execute any such Form3, 4, or 5, complete and execute any such Form3, 4, or 5, complete and execute any such Form3, 4, or 5, complete and execute any such Form3, 4, or 5, complete and execute any such Form3, 4, or 5, complete and execute any such Form3, 4, or 5, complete and execute any such Form3, 4, or 6, complete and execute any such Form3, 4, or 6, complete and execute any such Form3, 4, or 6, complete and execute any such Form3, 4, or 6, complete and execute any such Form3, 4, or 6, complete and execute any such Form3, 4, or 6, complete and execute any such Form3, 4, or 6, complete and execute any such Form3, 4, and 5 but form3, 4, or 6, complete and execute any such Form3, 4, or 6, complete and execute any such Form3, 4, or 6, complete and execute any such Form3, 4, or 6, complete and execute any such and such