FORM 4

☐ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

☐ 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.

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN 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

1. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
WHALEN C	CHAD MI	ICHAEI	L		F5	, IN	IC. [F	FIV]							oncable)			
(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)								Director10% Owner X Officer (give title below) Other (specify below)				below)		
C/O F5, INC., 801 5TH AVENUE						10/31/2024								EVP, Worldw	ide Sales	i		
	(Stre	et)			4. I	f An	nendme	nt, Date O	rigin	al File	ed (MM/D	D/YY	YY)	6. Individual o	or Joint/G	roup Filing	(Check Appl	icable Line)
SEATTLE, WA 98104													X _ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(C	ity) (Sta	te) (Zij	p)											roini inea oy	Wiore than C	one reporting i	Cison	
			Table	I - Non-	-Deri	ivati	ve Seci	ırities Acc	quire	ed, Di	sposed o	of, or	Be	neficially Owne	d			
1.Title of Security (Instr. 3) 2. Trans. I			Date	Exec	Deemed ution if any	3. Trans. Co (Instr. 8)	de	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			_	following Reported Transaction(s) Ownership Form: Benefi Direct (D) Ownership of Indi			7. Nature of Indirect Beneficial Ownership			
								Code	V	Amoi	int (A)		rice				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				10/31/20	024			A		15,68	<u>(1)</u> A		\$0			37,425	D	
	Tab	le II - Der	rivativo	e Securi	ties l	Bene	eficially	Owned (e.g.,	puts,	calls, wa	ırran	ıts,	options, conver	tible secu	ırities)		
			ion (Ins	Frans. Code 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				and Expiration Date Securities Derivative (Instr. 3 ar				ritie vativ r. 3 a		Underlying Security dd 4) Underlying Security Security (Instr. 5) Derivative Security Security (Instr. 5) Rei		rative Ownership rities Form of Eficially Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				C	Code	V	(A)	(D)	Date	e rcisable	Expiration Date	Title		mount or Number of pares		Transaction(s) (Instr. 4)	(I) (Instr. 4)	

Explanation of Responses:

(1) Shares acquired based on achievement of performance targets for November 1, 2021, November 1, 2022, and November 1, 2023 awards of Restricted Stock Units. Also includes 2,661 performance RSUs for which the Talent and Compensation Committee of the Board of Directors of F5, Inc. determined that the performance metrics have been achieved, but which remain subject to a requirement of continued service until February 1, 2025 for vesting and settlement in shares.

Reporting Owners

Panorting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
WHALEN CHAD MICHAEL								
C/O F5, INC.			EVD Warldwide Cales					
801 5TH AVENUE		EVP, Worldwide Sales						
SEATTLE, WA 98104								

Signatures

/s/ Scot F. Rogers by Power of Attorney

11/1/2024

**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 control number.