FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person* Mitchell David T.					2. Issuer Name and Ticker or Trading Symbol Fabrinet [FN]								(Check all applicable) X Director		olicable) etor	rting Person(s) to Issuer 10% Owner		
					3. Date of Earliest Transaction (Month/Day/Year) 01/04/2016							X	X Officer (give title Other (specification) CEO & Chairman					
(Street) DUBLIN			94568		4. 11	Amen	dment,	Date o	of Origin	nal File	ed (Month/Da		6. Indiv Line) X	′				
(City)	(St		Zip)	on-Deriv	/ative	Sec	uritie	s Ac	auire	d Di	snosed o	f or B	enefic	ially	Owne	-d		
1. Title of Security (Instr. 3) 2. Tra		2. Transac	tion	2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			5. Amo Securi Benefi Owned		ount of	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Ordinary	Shares			01/04/2	2016				S ⁽¹⁾		40,000	D	\$23.	303(2)	6	60,715	I	By Trust ⁽³⁾
Ordinary	Shares														5	97,322	D	
Ordinary	Shares														1	00,680	I	By 1st Son's Trust ⁽⁴⁾
Ordinary Shares													1	00,680	I	By 2nd Son's Trust ⁽⁴⁾		
Ordinary Shares												100,681		I	By 3rd Son's Trust ⁽⁴⁾			
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)	erivative scurity or Exercise parts. 3) Date (Month/Day/Year) Date (Month/Day/Year) If any (Month/Day/Year) Price of Derivative Security Date (Month/Day/Year) If any (Month/Day/Year) If any (Month/Day/Year)		Transa Code (ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares		Deri Sec (Inst	rice of vative urity ir. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

- 1. The sale reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on February 27, 2015.
- 2. This sale price represents the weighted average sale price of the shares sold ranging from \$23.11 to \$23.60 per share. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price within the range set forth in this Form 4.
- 3. Shares are held by the David T. Mitchell Separate Property Trust, of which the Reporting Person is the sole trustee
- 4. Shares are held in trusts for the benefit of each of the Reporting Person's children. The Reporting Person disclaims beneficial ownership of these securities, and the filing of this report is not an admission that the Reporting Person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.

Remarks:

Andrew Chew, Attorney-infact for David T. Mitchell

01/05/2016

** 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.