FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL					
	OMB Number: 3235-0						
l	Estimated average burd	en					
l	hours per response:	0.5					

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*  Mitchell David T.					2. Issuer Name <b>and</b> Ticker or Trading Symbol Fabrinet [FN]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
														X	Director Officer (give title			
						3. Date of Earliest Transaction (Month/Day/Year) 05/01/2017								X	X Officer (give title below) Other (specify below)  CEO & Chairman			
(Street)  DUBLIN			94568		- 4. If	Amer	idment	, Date	of Origir	ed (Month/Da	ay/Year)		6. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	(51		Zip)	on-Deriv	ative	Sec	uritie		nuire	4 Di	snosed o	f or B	enefic	vially	Owne	-d		
Date			2. Transac	tion	on 2A. Deemed Execution Date,			3. 4. Secur			rities Acquired (A) or ed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price			ted action(s) 3 and 4)		(Instr. 4)
Ordinary Shares 05/0			05/01/2	2017				S <sup>(1)</sup>		75,000	D	\$34.	728 <sup>(2)</sup>	1	45,715	I	By Trust <sup>(3)</sup>	
Ordinary Shares														7	75,680	I	By 1st Son's Trust <sup>(4)</sup>	
Ordinary Shares														7	75,680	I	By 2nd Son's Trust <sup>(4)</sup>	
Ordinary Shares														7	75,681	I	By 3rd Son's Trust <sup>(4)</sup>	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
			Transa Code (		of Deriv Secu Acqu (A) o Dispo	iired r osed ) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or		Deri Seci (Inst			Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Number of Shares					

## **Explanation of Responses:**

- 1. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on May 16, 2016.
- 2. This sale price represents the weighted average sale price of the shares sold ranging from \$34.44 to \$35.125 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

05/01/2017

\*\* Signature of Reporting Person

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.