FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* <u>Gill Harpal</u>						2. Issuer Name and Ticker or Trading Symbol Fabrinet [FN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					1										Direc	ctor	10	% Ow	vner
-														X		er (give title			pecify
(Last)	(Fi	rst) (	Middle)		3. 0	3. Date of Earliest Transaction (Month/Day/Year)									belov	,		low)	
C/O FABRINET USA, INC.				05/	05/21/2018								President & COO						
·																			
3736 FALLON ROAD #428				$\vdash$															
				_   4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)						
(Street)													Ι,	X	Eorn	n filed by One	Donorting	Porcoi	n
<b>DUBLIN</b>	C.F	A 9	94568											Λ		•			
					.									Form filed by More than One Rep Person					rting
(City)	(C+	oto) (	Zin)												1 013	011			
(City)	(31	ate) (	Zip)																
		Tabl	e I - N	on-Deriv	ative/	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefici	ally	Owne	ed			
1. Title of S	Security (Inst	r. 3)		2. Transac	tion	on 2A. Deemed 3. 4. Securities Acquired (A) of							mount of 6. Ownership			7. Nature			
Date (Month/Day/				v/Vear)	Execution Date, Year) if any		Transaction Disposed Of (D) (Instr. 3, 4 at Code (Instr.			tr. 3, 4 and			ities icially	Form: Dire		of Indirect Beneficial			
(worth			(WOILLINDE			(Month/Day/Year)						Own		d Following	(I) (Instr. 4)		Ownership		
									T	Amount (A) or		1		Reported Transaction(s)			- 10	(Instr. 4)	
									Code	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Amount	(D)	Price			3 and 4)			
Ordinary Shares 05/21/20					2018	018		S		21,457	D	\$37.0	)55 <sup>(1)</sup> 1		30,506	D			
		Ta	hla II	- Derivat	ive S	ACUT	itiae	Δοαι	iirad	Dien	osed of,	or Ber	eficial	ly Ov	han				
		16	ibic ii						,		convertib			•	viicu				
				<del>\ \ \ \ \</del>		u5,								1					
1. Title of Derivative	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Dec	emed ion Date,	4.	ransaction of ode (Instr. Derivative				6. Date Exercisable and Expiration Date		7. Title and Amount of		8. Price of Derivative		9. Number o derivative	f 10. Owners		11. Nature of Indirect
Security			if any	´				(Month/Day/Year) Sec Und			Securities		Security		Securities	Form:		Beneficial	
(Instr. 3)	Price of Derivative		(Month	/Day/Year)	ır)   8)		Securities Acquired					Underlying Derivative		r. 5)	Beneficially Owned	Direct (		Ownership (Instr. 4)	
Security						(A) or			Security (Instr.				3		Following	wing (I) (Instr. 4)		(111501. 4)	
					Disposed of (D)			and 4)						Reported Transaction(s)					
								(Instr. 3, 4								(Instr. 4)	(3)		
				Į.				5)											
													Amount						
													or Number						
									Date		Expiration		of						
	Code	V	(A)	(D)	Exerci	sable	Date	Title	Shares	1			- 1	- 1					

## **Explanation of Responses:**

1. This sale price represents the weighted average sale price of the shares sold ranging from \$37.00 to \$37.16 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.

## Remarks:

Andrew Chew, Attorney-infact for Harpal Gill 05/21/2018

\*\* 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.