FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0287									
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0.5

hours per response:

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 for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-14(s) Care that still a condition of Rule 10b5-14(s)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

.(-)	ee instruction i	<u> </u>			_									_						
Name and Address of Reporting Person* Gill Harpal						2. Issuer Name and Ticker or Trading Symbol Fabrinet [FN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
UIII IIa	<u>1pa1</u>				1	= [* * * *]								Direc	tor		10% O\	wner		
														1	Office below	er (give title /)	Other (spe		specify	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 08/19/2024								PRESIDENT & COO						
C/O FABRINET USA, INC.						00/17/202 4														
3736 FALLON ROAD #428																				
						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														Lille)	Form	filed by One	a Panc	orting Perc	on	
DUBLIN	I CA	A 9.	4568											V		•		•		
															Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)																	
		Table	I - No	n-Deriva	tive \$	Secu	rities	Acc	uired	, Dis	posed of	, or B	enef	icially	/ Own	ed				
1. Title of S	Security (Inst	r. 3)		2. Transact	ion 2A. Deemed			3. 4. Securities Acquired (A)				or 5. Amount of			6. Ownership		7. Nature			
	,,,,,,	,		Date (Month/Day	//Voar)	Execution Date, (Year) if any			Transaction Disposed Of (D) (Instr. 3, 4			4 and Securit				D) or Indirect) (Instr. 4)	of Indirect Beneficial			
William					(Month/Da			/Year)	8)					Owned	l Following			Ownership		
									Code	v	Amount	(A) o	(A) or		Transa	Reported Fransaction(s) (Instr. 3 and 4)			(Instr. 4)	
									(1)		2.660	+ -	+	21.55	<u> </u>			Б		
Ordinary Shares 08/19/20					:024				F ⁽¹⁾		2,660	D \$2		231.55	32,082		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
				(e.g., pu	ıts, ca	alls, ۱	warra	ants,	optio	ns, d	convertib	le se	curiti	ies)						
1. Title of	2.	3. Transaction	3A. Deemed		4.		5. Number					7. Title and			Price of	9. Number of		10.	11. Nature	
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execut	tion Date,	Transa Code (Expiration Da (Month/Day/Y			Amount of Securities			rivative curity	derivative Securities		Ownership Form:	of Indirect Beneficial	
(Instr. 3)				n/Day/Year)	8)			Securities Acquired		Under			lying		str. 5) Benefici Owned		lly Direct	Direct (D) or Indirect	Ownership (Instr. 4)	
						(A) or		Derivati Security 3 and 4)			ity (Ins	str.	Following Reported Transaction			(I) (Instr. 4)	(111501.4)			
						Disposed of (D)					4)									
					(Instr. 3, and 5)		ŕ. 3, 4						(Instr. 4)		(*)					
						Ι	1 1 1						A #							
													Amou or							
									Date		Expiration		Numb of	er						
								Exercisable Date			Title									

Explanation of Responses:

1. The reported shares were withheld to cover the Reporting Person's tax liability in connection with the vesting of restricted share units.

Andrew Chew, Attorney-infact for Harpal Gill 08/21/2024

** 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 Number.