

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

OMB APPROVAL

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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 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

| (Print or Type Responses) | | | | | | | | | | | |
|---|------------|---|--|--------------|---|-----------|---|--|--------|----------------------------|------------|
| 1. Name and Address of Rep GALLAGHER JOSEP | | 2. Issuer Name and Ticker or Trading Symbol GULF ISLAND FABRICATION INC [GIFI] | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | |
| 583 THOMPSON ROA | AD (First) | | . Date of Earliest Tra 1/17/2006 | ansaction (M | Ionth | /Day/Year |) | X_ Officer (give title below) Other (specify below) VP Fin./CFO, Treas/Asst Secy | | | |
| HOUMA, LA 70363 | 4 | . If Amendment, Dat | te Original F | Filed(1 | Month/Day/Y | 'ear) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (State) | (Zip) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | |
| (Instr. 3) Da | | 2. Transaction Date (Month/Day/Year) | Execution Date, if Code | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | Beneficial Ownership | |
| | | | | Code | V | Amount | (A) or (D) | Price | | or Indirect (I) (Instr. 4) | (Instr. 4) |
| Common Stock | | 11/17/2006 | | М | | 9,000 | A | \$ 9.5 | 28,900 | D | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | Conversion | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code |) | of Deri Secu Acq (A) Disp of (I (Inst | vative urities uired or cosed D) tr. 3, 4, | 6. Date Exercisal Expiration Date (Month/Day/Year | of Underlyin Securities | of Underlying D | | Derivative Securities Beneficially Owned Following | Derivative Security: Direct (D) or Indirect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|------------------------------|------------|--|---|------|---|--|--|---|----------------------------|-----------------|--|--|--|--|--|
| | | | | Code | V | and (A) | , | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Options (Right to Buy) | \$ 9.5 | 11/17/2006 | | M | | | 9,000 | 01/03/2001(1) | 01/03/2010 | Common Stock | 9,000 | \$ 0 | 0 | D | |

Reporting Owners

| Donouting Owner Name / Address | Relationships | | | | | | | | |
|--|---------------|----------------------------|------------------------------|--|--|--|--|--|--|
| Reporting Owner Name / Address | Director | Director 10% Owner Officer | | | | | | | |
| GALLAGHER JOSEPH P 583 THOMPSON ROAD HOUMA, LA 70363 | | | VP Fin./CFO, Treas/Asst Secy | | | | | | |

Signatures

| Joseph P. Gallagher | 11/17/2006 |
|-------------------------------|------------|
| Signature of Reporting Person | Date |

Explanation of Responses:

- * 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).
- (1) Exercisable in annual increments equal to 20% of the total number of options beginning on 01/03/2001 and on the next four subsequent anniversaries thereof.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.