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

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longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

(Print or Type Responses)

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

| 1. Name and Address of Reporting Person * SEIBERT ROBIN A | | | | 2. Issuer Name and Ticker or Trading Symbol GULF ISLAND FABRICATION INC [GIFI] | | | | | | | 5 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
|---|---------|--|----------------------------------|---|----------------------------------|--|--------------------------------------|--------------------------------------|----------------------|---|----------------|---|-------------------------------|--------------------------------------|--|--|--|
| 583 THOMPSON ROAD (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/08/2006 | | | | | | | - | X_ Officer (give title below) Other (specify below) Controller & CAO, Secretary | | | | | |
| (Street) | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| HOUMA, LA 70363 (City) (State) (Zip) | | | | Table I - Non-Derivative Securities Acqu | | | | | | | canir | ured, Disposed of, or Beneficially Owned | | | | | |
| 1. Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | | 3. Transac Code (Instr. 8) | | 4. Securities Acc (A) or Disposed | | quire d of (I | uired 5. Amo of (D) Benefic Reporte | | ount of Securities icially Owned Following ted Transaction(s) 3 and 4) | | 6. | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | C | ode | V | Amour | (A) or (D) | Pri | ice | | | | or Indirect (I) (Instr. 4) | (Instr. 4) |
| Commor | n Stock | | 12/08/2006 | | | | A | | 1,650 | A | \$ 0 |) 4 | 1,300 | | | D | |
| Common Stock | | | 12/09/2006 | | | | F | | 98 | D | \$ 39. | .4 | 4,202 | | | D | |
| | | | Table II - | Derivative S | | | cquir | the f | orm di | splays of, or B | a cur enefi | rrent icially | ly valid | d OMB co | espond unles ntrol number | | |
| 1. Title of | 2 | 3. Transaction | 3A. Deemed | (e.g., puts, ca | | varrai 5. | | | s, conve te Exerc | | | Title | and | 8 Price of | 9. Number of | 10. | 11. Nature |
| Derivative Security (Instr. 3) | | | Execution Date | e, if Transaction N Code Car) (Instr. 8) I S | | Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | and Expiration Date (Month/Day/Year) | | | An Un Se | moun nderly ecuriti nstr. 3 | et of ying ies 3 and | Derivative Security (Instr. 5) | Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Ownership Form of Derivative Security: Direct (D) or Indirect | of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | V | (A) | | Date Exerc | | Expiration Date | n Tit | tle o | Number | | | | |
| Renor | ting () | wners | | | | | | | | | | | | | | | |

| Denouting Owner Name / Address | Relationships | | | | | | |
|---|----------------------------|--|-----------------------------|-------|--|--|--|
| Reporting Owner Name / Address | Director 10% Owner Officer | | Officer | Other | | | |
| SEIBERT ROBIN A 583 THOMPSON ROAD HOUMA, LA 70363 | | | Controller & CAO, Secretary | | | | |

Signatures

| Robin A. Seibert | 12/12/2006 | | |
|---------------------------------|------------|--|--|
| **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).

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.