FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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 Ty	pe Responses	s)														
1. Name and Address of Reporting Person *- Wallis Robert Allen				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					
16225 PARK TEN PLACE, SUITE 280				3. Date of Earliest Transaction (Month/Day/Year) 02/25/2018							X_Officer (give title below)Other (specify below) Chief Accounting Officer					
(Street) HOUSTON, TX 77084				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					
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqu							ired, Disposed of, or Beneficially Owned					
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date,	if Code (Instr. 8)		4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)		of (D)	Benefici	ant of Securities ally Owned Following d Transaction(s) and 4)		Form:	7. Nature of Indirect Beneficial Ownership		
						(Code	V	Amoun	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock		02/25/2018				F	6	60 <u>(1)</u>	D	\$ 11.4	14,308			D		
			Table II -	Derivative			Acquir	the for	rm dis posed	splays a of, or Be	curre neficia	ntly vali illy Owne	d OMB coi	espond unles ntrol number		
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise (Month/Day/Y Security Security		Execution Dat	4. Transa Code	4. 5. Transaction Nu Code of (Instr. 8) Dei Sec Acci (A) Dis of (Instr. 8) Dis of (Instr. 8) Nu Code of (Instr. 8) Dei Sec Acci (A) Dis of (Instr. 8) Dis of (Instr. 8)		Acquired A) or Disposed of (D) Instr. 3, 4, and 5) 6. Date 6. Date and E (Monto Derivative Securities Acquired A) or Disposed of (D) Instr. 3, 4, and 5)		eisable Expiration Expiration Expiration Expiration Date		7. Tit Amo Unde Secu (Instr 4)	Amount or Number of	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)	
				Code	V	(A)	(D)					Shares				

Reporting Owners

Donouting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Wallis Robert Allen 16225 PARK TEN PLACE SUITE 280 HOUSTON, TX 77084			Chief Accounting Officer					

Signatures

Robert Allen Wallis	02/27/2018				
**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) Represents shares withheld upon vesting of restricted stock units.

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.