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

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

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person \*

(Print or Type Responses)

CHAUVIN KERRY J

#### 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

2. Issuer Name and Ticker or Trading Symbol

GULF ISLAND FABRICATION INC [GIFI]

CHAUVIN KERRY J				GULF ISLAND FABRICATION INC [GIF1]							Director 10% Owner					
(Last) (First) (Middle) 583 THOMPSON ROAD				3. Date of Earliest Transaction (Month/Day/Year) 06/17/2009							Officer (give title below)Other (specify below) CEO					
(Street) HOUMA, LA 70363				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 Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		if Co (In	Transa ode ostr. 8)	(4	4. Securities Acqu (A) or Disposed c (Instr. 3, 4 and 5)		of (D) Benefici		d Transaction(s)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
						(	Code	VA	Amoun	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock		06/17/2009				A	1	0,000	) A	\$ 0	140,85	7.692		D	
			Table II -					the for	rm dis posed	splays a	curre	ntly valid	d OMB cor	espond unles ntrol number.		
Security (Instr. 3)	c of 2. 3. Transaction 3A. Deemed 4. Execution Date, if Transaction Code		5. Num of Deriv Secu Acqu (A) of Disp of (E) (Inst: 4, an	Number of (Number of (Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		5. Date Exercisable and Expiration Date Month/Day/Year)  Date Exercisable Expiration Date		7. Tr Amo Unde Secu (Instr 4)	Amount or Number of Shares		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)	Beneficial Ownership (Instr. 4)			

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
CHAUVIN KERRY J 583 THOMPSON ROAD HOUMA, LA 70363			CEO				

## **Signatures**

Kerry J. Chauvin	06/18/2009
**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.