FORM 4

(Print or Type Responses)

SEIBERT ROBIN A

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

OMB APPROVAL

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

5. Relationship of Reporting Person(s) to Issuer

Director

(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 *

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]

(Last) (First) (Middle) 583 THOMPSON ROAD					3. Date of Earliest Transaction (Month/Day/Year) 11/30/2011									_X_ Officer (give title below) Other (specify below) VP Finance, CFO, Treasurer				
(Street) HOUMA, LA 70363					4. If Amendment, Date Original Filed(Month/Day/Year)									6. Individual or Joint/Group Filing(Check Applicable Line)				
(City	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	Execution Date, if			Cod (Ins	ransa le str. 8)	ection	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)				7. Nature of Indirect Beneficial Ownership
							C	ode	V	Amou	ant (A) o		rice				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock 11/30/2011							A			4,00	0 A	\$	0 8	19,839			D	
			Table II -					cquir	the fred, D	orm d	lisplays	a cu Benef	u rre r ficial	ntly valid	d OMB cor	espond unles ntrol number.		
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Yo	3A. Deemed Execution Date any (Month/Day/Ye	Code) II S A ((II C		ative ities red sed 3, 5)	and E (Mon	xpirati th/Day	Expiratio	A U S (1 4	Amou Jnder Secur Instr.	Amount or Number		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)
				(Code	V	(A)	(D)	Exerc	eisable	Date			of Shares				
Repor	ting O	wners																

Other

Relationships

VP Finance, CFO, Treasurer

Officer

Signatures

SEIBERT ROBIN A 583 THOMPSON ROAD

HOUMA, LA 70363

Reporting Owner Name / Address

Robin A. Seibert	12/01/2011				
***Signature of Reporting Person	Date				

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Director

10% Owner

** 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.