FORM 4

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

OMB APPROVAL

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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).

(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 – Favret Jeff		GULF ISLAND FABRICATION INC [GIFI]				(Check all applicable) Director X Officer (give title below) Chief Financial Officer					
(Last) (First) (Middle) 567 THOMPSON ROAD		3. Date of Earliest Transaction (Month/Day/Year) 05/13/2013									
(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							ned by whole the	an One Reporting 1	.13011		
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acqu				iired, Dis	posed of, or	Beneficially C	wned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)	(A)	4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)		Benefici	unt of Securities ially Owned Following d Transaction(s) and 4)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
			Code	V Am	ount (A) or (D)	Price				or Indirect (I) (Instr. 4)	ct (Instr. 4)
Common Stock	05/13/2013		Α	4,0	00 A	\$0	4,000]	D	
Reminder: Report on a separate li			ĺ	Persons containe	who respo	rm are	not req	uired to re	formation espond unless strol number.		1474 (9-02)
reminuel. Report on a separate i		Derivative Securit	ies Acquir	Persons containe the form red, Dispos	who respo d in this fo displays a ed of, or Be	rm are curre neficia	not req ntly valid	uired to re d OMB cor	spond unless		1474 (9-02)
Title of	Table II -	(e.g., puts, calls, w 4. 5 e, if Transaction N Code o (ear) (Instr. 8) 5 A (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (ies Acquir arrants, oj	Persons containe the form red, Dispos	who respo d in this for displays a ed of, or Be vertible secretisable tion Date	rm are curre neficia urities 7. Tit Amo Unde Secur	e not req ntly valid lly Owne) lle and unt of orlying	uired to re d OMB cor	spond unless		11. Nature

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Favret Jeff 567 THOMPSON ROAD HOUMA, LA 70363			Chief Financial Officer			

Signatures

Jeffrey M. Favret	05/15/2013
**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.