**GULF ISLAND FABRICATION INC** Form 3 January 13, 2017 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number:

#### **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

#### (Print or Type Responses)

1. Name and Address of Reporting Person <u>^</u> SCHORLEMER DAVID SCOTT			2. Date of Event Requiring Statement (Month/Day/Year) 01/03/2017	3. Issuer Name and Ticker or Trading Symbol GULF ISLAND FABRICATION INC [GIFI]					
(Last)	(First)	(Middle)		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
16225 PARK TEN PLACE, SUITE 280				(Check all applicable)					
(Street) HOUSTON, TN 77084				Director 10% Owner X Officer Other (give title below) (specify below) Chief Financial Officer		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
110001010	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	001					Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Secu (Instr. 4)	rity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.			
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)									
Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.									
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)	

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Shares	or Indirect
	(I)
	(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Addr	·ess	Relationships						
		10% Owner	Officer	Other				
SCHORLEMER DAVID SC 16225 PARK TEN PLACE SUITE 280 HOUSTON, TN 77084	OTT Â	Â	Chief Financial Officer	Â				
Signatures								
/s/ David S. Schorlemer	1/13/2017							
**Signature of Reporting Person	Date							
Explanation of D	aanana	~~.						

# **Explanation of Responses:**

### No securities are beneficially owned

\* If the form is filed by more than one reporting person, *see* Instruction 5(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.