

Kalivas Paul
 Form 3
 February 10, 2012

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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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 *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Kalivas Paul		(Month/Day/Year)	Fabrinet [FN]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
		02/03/2012		
C/O FABRINET USA, INC.,Â 4104 24TH STREET #345			(Check all applicable)	
(Street)			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
			(give title below) (specify below)	
			Secretary & General Counsel	
SAN FRANCISCO,Â CAÂ 94114			6. Individual or Joint/Group Filing(Check Applicable Line)	
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Ordinary Shares	10,623 ⁽¹⁾	D	Â

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 Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Stock Option (right to buy)	02/14/2009 ⁽²⁾	02/13/2015	Ordinary Shares	3,125	\$ 5	D	Â
Stock Option (right to buy)	11/13/2010 ⁽³⁾	10/13/2017	Ordinary Shares	13,229	\$ 16.83	D	Â
Stock Option (right to buy)	09/18/2011 ⁽³⁾	08/17/2018	Ordinary Shares	3,902	\$ 15.16	D	Â
Stock Option (right to buy)	12/10/2011 ⁽³⁾	11/09/2018	Ordinary Shares	21,638	\$ 14.12	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Kalivas Paul C/O FABRINET USA, INC. 4104 24TH STREET #345 SAN FRANCISCO, CA 94114	Â	Â	Â Secretary & General Counsel	Â

Signatures

/s/ Paul Kalivas 02/10/2012

__Signature of Date
Reporting Person

Explanation of Responses:

- * 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).
- Each share is represented by a Restricted Stock Unit ("RSU"). The RSUs will vest in equal annual installments over a period of four years
- (1) on the anniversary date of the RSU grant, provided that the Reporting Person is a service provider on each such vesting date. The RSUs will become fully vested on November 3, 2015.
 - (2) 25% of the shares subject to the option vested and became exercisable on February 14, 2009, and the remaining shares have vested and will vest monthly thereafter, such that 100% of the shares subject to the option will be fully vested and exercisable on February 14, 2012.
 - (3) The shares subject to this option vest in equal installments of 1/48 per month until fully vested and exercisable.

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.