

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL	
OMB Number:	3235-0287
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1. Name and Address of Reporting Person * <u>McPhail Steven</u> <hr/> (Last) (First) (Middle) FLUIDIGM CORPORATION 7000 SHORELINE COURT, SUITE 100 <hr/> (Street) SOUTH SAN FRANCISCO CA 94080 <hr/> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>FLUIDIGM CORP [ FLDM ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>GM, PRODUCTION GENOMICS</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>05/21/2015</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

**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)	3. Transaction Code (Instr. 8)		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)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Restricted Stock Units	(1)	05/21/2015		A		12,400		(2)	(2)	Common Stock	12,400	\$0	12,400	D	
Employee Stock Option (Right to Buy)	\$25.23	05/21/2015		A		31,000		(3)	05/21/2025	Common Stock	31,000	\$0	31,000	D	

**Explanation of Responses:**

- Each Restricted Stock Unit represents the contingent right to receive one share of FLDM common stock upon vesting of the unit.
- 12/48th of the total number of shares underlying the Restricted Stock Units granted will vest on May 20, 2016, and 3/48th of the total number of shares underlying the Restricted Stock Units granted will vest every three months thereafter until fully vested, subject to recipient's continued status as a Service Provider as defined in the Company's 2011 Equity Incentive Plan through the applicable vest date.
- 12/48th of the total number of shares subject to the Option will vest on May 7, 2016 and 1/48th of the total shares subject to the Option will vest and become exercisable each month thereafter over the succeeding 36 months, such that the Option will be fully vested on May 7, 2019, subject to the recipient's continuing to be a Service Provider as defined in the Company's 2011 Equity Incentive Plan.

**Remarks:**

/s/ Valerie Barnett, attorney-in-fact 05/26/2015

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* 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.

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 Number.