FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* JOG VIKRAM						2. Issuer Name and Ticker or Trading Symbol FLUIDIGM CORP [FLDM]								neck a	all applic Directo	cable)	g Pers	son(s) to Iss 10% Ov Other (s	vner
_	FLUIDIGM CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 11/11/2011									X Officer (give title Officer (specify below) CHIEF FINANCIAL OFFICER				
7000 SH																			
(Street) SOUTH SAN FRANCISCO CA 94080				- 4. l	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	ity) (State) (Zip)																		
		Tab	le I - I	Non-Deriv	vative	Sec	uriti	ies A	cquired	d, D	isposed o	of, or B	eneficia	lly O	wned	ı			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye						if any	emed tion Date, n/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Benef Owne		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a		tion(s)			(Instr. 4)
Common Stock 11/11/201						1			М	丁	5,661	A	\$4.45	1.45		,661		D	
Common Stock 11/11/201						1			S ⁽¹⁾		5,661 ⁽²⁾	D	\$13.331	.3312(2)		0.00		D	
		7	able								sposed of , converti			/ Ov	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any		4. Transa Code (8)			vative urities uired or oosed o) tr. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Deri Sec	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (Right to Buy)	\$4.45	11/11/2011			M			5,661	(3)		02/06/2018	Commor Stock	5,661		\$0	76,430		D	

Explanation of Responses:

- $1. \ The \ sales \ reported \ by \ Mr. \ Jog \ were \ effected \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ on \ August \ 30, \ 2011.$
- 2. The "Amount" and "Price" reported in this Column 4 reflect the aggregate number and weighted-average price, respectively, of shares acquired. These shares were purchased in multiple transactions at prices ranging from \$13.01 to \$13.5050, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the SEC staff, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth herein.
- 3. 18.75% of the shares subject to the Option vested on February 7, 2009 and 1/48th of the shares subject to the Option vest each month thereafter.

/s/ William M. Smith, attorney-11/15/2011 in-fact

** Signature of Reporting Person

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.