FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | VAL |
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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

| 1. Name and Address of Reporting Person* BARTHELEMY NICOLAS | | | | | | 2. Issuer Name and Ticker or Trading Symbol FLUIDIGM CORP [FLDM] | | | | | | | | 5. Relationship of Report (Check all applicable) X Director | | | ting Pe | . , | Issuer Owner |
|---|--|--|---|----------|-------------------------------|---|-----|-----|--|--------|--------------------|---|---|--|--|--|---------------|--|-----------------------------------|
| | (Fi GM CORPO | | 3. Date of Earliest Transaction (Month/Day/Year) 02/13/2018 | | | | | | | | | Office below | er (give titl w) | е | Other below | r (specify v) | | | |
| 7000 SHORELINE COURT, SUITE 100 (Street) SOUTH SAN FRANCISCO CA 94080 | | | | | 4. If | 4. If Amendment, Date of 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 | | | | | |
| (City) | (S1 | - | Zip) | an Dariu | entitus. | Coo | | | ~ivo.d | L Did | | f ar D | onofic | الماد | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | | | | | on 2A. Deemed Execution Date, | | | quired, Disposed of, or Bene 3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | ed (A) or tr. 3, 4 a | 5. Amount of Securities Beneficially Owned Following Reported | | nt of s ally ollowing | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of ndirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Transact (Instr. 3 a | | | | |
| Common Stock 02/13/20 | | | | | | | | | A | | 7,539(1) | A | \$ | 23,8 | | 862 | | I 1 | The Barthelemy 2001 Trust |
| | 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. Transa Code (i 8) | | | | 6. Date Expirati (Month) | ion Da | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | De Se (In | Price of erivative ecurity estr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amount or Number of Shares | er | | | | | |

Explanation of Responses:

1. Each Restricted Stock Unit represents the contingent right to receive one share of FLDM common stock upon vesting of the unit. Subject to the Reporting Person's continued service with the Issuer through each applicable vesting date, twenty-five percent (25%) of the shares underlying the Restricted Stock Units shall vest quarterly on the last day of each quarter during 2018.

Remarks:

/s/ Nicolas Barthelemy by Nicholas Khadder, Attorney-

02/15/2018

Date

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.