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

1. Name and Address of Reporting Person* JOG VIKRAM (Last) (First) (Middle) FLUIDIGM CORPORATION					3. C	2. Issuer Name and Ticker or Trading Symbol FLUIDIGM CORP [FLDM] 3. Date of Earliest Transaction (Month/Day/Year) 05/12/2015								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) CHIEF FINANCIAL OFFICER				
7000 SH (Street) SOUTH FRANCI (City)	SAN SCO C.		94080 (Zip)		4. 11	4. If Amendment, Date of Original Filed					d (Month/Da	ay/Year)		6. Individual or Joint/Group Filing (Check Applicab Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
1. Title of S	Security (Ins		le I - No	2. Transa		2,4	. Deen	ned	3.			es Acquire	I (A) or	5. Am	unt of			7. Nature of
, , , , , , , , , , , , , , , , , , ,			Date (Month/Day/Year)) if :	Execution Date, if any (Month/Day/Year)		Transaction Code (Instr. 8)				. 3, 4 and	Securities Beneficially Owned Following Reported		(D) or Indirect (I) (Instr. 4)		Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price		ction(s) 3 and 4)				
Common Stock													2,061			See Footnote ⁽¹⁾		
Common Stock 05/12/2				/2015	015		M		3,185	A	\$14.6	5	,129	D				
Common Stock 05/12/				/2015	015		М		765	A	\$16.7	3	,894	94 D				
Common Stock 05/12/2				/2015)15		S ⁽²⁾		3,950	D	\$27.1	7	944	l D				
		Т	able II								osed of, converti			y Owne	d			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date ecurity or Exercise (Month/Day/Year) if any		on Date,	4. Transactior Code (Instr. 8)		ion of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price Derivati Security (Instr. 5	derivat Securi Benefic Owned Follow Report Transa	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		11. Nature p of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisa		Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (Right to Buy)	\$14.6	05/12/2015			M			3,185	(3)		05/17/2021	Common Stock	3,185	\$0	3,:	334	D	
Employee Stock Option (Right to Buy)	\$16.73	05/12/2015			M			765	(4)		02/15/2023	Common Stock	765	\$0	28,	402	D	

Explanation of Responses:

- $1. \ Shares \ held \ indirectly \ by \ the \ Vikram \ and \ Pratima \ Family \ Trust \ U/A \ dated \ June \ 23, \ 2009.$
- 2. The sales reported by Mr. Jog were effected pursuant to a Rule 10b5-1 trading plan adopted on September 13, 2013.
- 3. 1/48th of the shares subject to the Option vested on June 18, 2011 and 1/48th of the shares subject to the Option vest each month thereafter, such that the Option will be fully vested on May 18, 2015.
- 4. 1/48th of the shares subject to the Option vested on February 1, 2013 and 1/48th of the shares subject to the Option vested on March 1, 2013 and each month thereafter, such that the Option will be fully vested on January 1, 2017.

Remarks:

/s/ Valerie Barnett, attorney-in-05/14/2015 fact

** 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.