FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
vasimigton,	D.O.	200-0	

OMB APPROVAL								
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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)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*     Linthwaite Stephen Christopher					2. Issuer Name <b>and</b> Ticker or Trading Symbol FLUIDIGM CORP [ FLDM ]						(Che	elationship of ck all applica Director	ble)	Perso	n(s) to Issue 10% Ow Other (s	ner	
(Last)	(F	First)	(Middle)									X	below)			below)	peony
C/O FLU	JIDIGM CO	ORPORATION	` ,		3. Date of Earliest Transaction (Month/Day/Year) 09/20/2017									Presider	nt & C	EO	
7000 SH	ORELINE	COURT, SUITE	100														
(Street) SOUTH FRANCE	- (	CA	94080		4. If Amendment, Date of Original Filed (Month/Day/Year)					Line)	ndividual or Joint/Group Filing (Check Applicable 2) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5	State)	(Zip)														
		Т	able I - Non-	Deriva	tive S	ecurit	ies Acc	uired,	Dis	posed of	, or Ben	eficially	Owned				
		. Transac Date Month/Da	Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 and 1)						Form: y (D) or		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								v	Amount	(A) or (D)	Price	Transactio (Instr. 3 an	on(s) nd 4)		"	30. 4)	
			Table II - D							osed of, o			wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year) if any Code (Instr. Securities (Month/Day/Year) 8) Acquired (A)		ve es d (A) or ed of (D)	6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4)			es J Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following		Ownership Form:	Beneficial Ownership (Instr. 4)				
				Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares		Reported Transact (Instr. 4)	nsaction(s)		
Employee Stock Option (Right to Buy)	\$9.05	09/20/2017		D			140,000	(1)		(1) 08/09/2026 Common Stock 140,000 (2) 0			D				
Employee Stock Option (Right to Buy)	\$5.13	09/20/2017		A		70,000		(3)		09/20/2027	Common Stock	70,000	(2)	70,000		D	

## **Explanation of Responses:**

- 1. The Option provided for vesting of 12/48th of the total number of shares subject to the Option on August 1, 2017 and thirty-six equal monthly installments beginning on September 1, 2017.
- 2. On September 20, 2017, the Issuer cancelled, pursuant to the Issuer's option exchange program, an Option for 140,000 shares of FLDM common stock granted to the Reporting Person on August 9, 2016. In exchange, the Reporting Person received a replacement Option, for 70,000 shares, having an exercise price of \$5.13 per share.
- 3. 1/12th of the total number of shares underlying the Option will vest on February 20, 2018, and 1/12th of the total number of shares underlying the Option granted will vest every three months thereafter until fully vested, subject to the Reporting Person's continued status as a Service Provider as defined in the Company's 2011 Equity Incentive Plan through the applicable vest date.

## Remarks:

/s/ Nicholas Khadder, Attorney-09/22/2017 in-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.