FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

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

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* Worthington Gajus Vincent					2. Issuer Name and Ticker or Trading Symbol FLUIDIGM CORP [FLDM]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
													X Direct	or		10% Owner		
(1+)	(F		(N. 41: -1 -11 - N		_									X Office below	give title	:	Other below	(specify
(Last)	ا-) GM CORP(*	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/20/2015							PRESIDENT & CEO					
			100		02/	20/20	J13											
/000 SH	ORELINE	COURT, SUITE	100															
(Street)					4. I1	Amer	ndmer	nt, Date	of Origina	l File	ed (Month/D	ay/Year)		Individual or ne)	Joint/Grou	up Filing	g (Check A	pplicable
SOUTH	SAN C	Δ	94080										"	•	filed by O	ne Rep	orting Pers	son
FRANCI	ISCO C.	\mathbf{A}	94080												,		n One Rep	
					-									Perso	n			,
(City)	(S	tate)	(Zip)															
		Tab	le I - No	on-Deriv	/ative	Sec	uriti	ies Ac	quired,	Di	sposed (of, or Be	neficia	lly Owne	d			
Date		2. Transa Date (Month/Da			2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispos Code (Instr. 5)		Disposed	ities Acquired (A) or d Of (D) (Instr. 3, 4 a		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D) Price						(Instr. 4)		
Common Stock											33,	33,029		I I	See Footnote ⁽¹⁾			
Common Stock 02/20/2				2015)15		M		1,625	A	(2)	5,0	5,005		D			
Common Stock 02/20/2			2015)15		F		611	D	\$38.9	7 4,3	94	D					
		т	able II	- Deriva	tive S	Secu	ritie	s Arn	uired [Disr	nosed of	or Ben	eficiall	y Owned		<u> </u>		
		•	u.b.o								converti			, 0111100				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deer Execution if any (Month/E	n Date, Transac Code (In			ction of		6. Date E: Expiration (Month/D	n Dat	e Amount of		f s g Security	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficie Owned Followin Reported Transact (Instr. 4)	e es ally g	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares					
Restricted Stock	(2)	02/20/2015			M			1,625	(3)		(3)	Common Stock	1,625	\$0	18,9	59	D	

Explanation of Responses:

- 1. Shares held directly by the Worthington Family Trust dated March 6, 2007, a trust for the benefit of the Reporting Person and the Reporting Person's spouse, for which the Reporting Person and the Reporting Person's spouse serve as trustees.
- 2. Each Restricted Stock Unit represents the contingent right to receive one share of FLDM common stock upon vesting of the unit.
- 3. On March 14, 2014, the Reporting Person was granted 26,000 Restricted Stock Units of which 4/48th of the total number of shares underlying the Restricted Stock Units granted vested on May 20, 2014, 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.

Remarks:

02/24/2015

** 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.