FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |

0.5

hours per response:

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* Jordan Rhonda L | | | | | | 2. Issuer Name and Ticker or Trading Symbol Colfax CORP [CFX] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|---|--|---|---------|---|---|---------|--------------------------------------|--|-------|---|---|------------------------|---|---|---|---|--|------------|--|
| Jordan Knonda L | | | | | | | | | | | | | | X Dire | ector | | 10% O | wner | | |
| (Last) (First) (Middle) KRAFT FOODS INC., THREE LAKES DRIVE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/30/2010 | | | | | | | | | | Officer (give title elow) | | Other (below) | specify | | |
| | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6 | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) | | | | | , = 1 1 1 (| | | | | | | | L | Line) | | | | | | |
| NORTHE | TELD II | . (| 50093 | | | | | | | | | | | | | m filed by On | | J | | |
| | | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | |
| (City) | (S | tate) (| Zip) | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Non | -Deriva | ative | Sec | curitie | s Ac | quired, | Dis | posed o | f, or | Bene | eficia | ally Own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Execution Date | | n Date, | Transaction Disposed Code (Instr. 5) | | | ities Acquired (A) d Of (D) (Instr. 3, | | | nd Secu Bene | ficially ed Following | Forr (D) | wnership m: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | () | A) or D) | Price | Trans | action(s) . 3 and 4) | | | (111511.4) | |
| Common Stock, par value \$.001 06/30/ | | | | | /2010 | /2010 | | A | | 1,081 | | A | \$ | 0 | 23,071 | | D | | | |
| | | Та | ble II - D (e | | | | | | | | sed of, onvertib | | | | y Owned | i | | | | |
| 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) | Date, | 4. Transactior Code (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | 8. Price of Derivative Security (Instr. 5) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nun of Sha | nber | | | | | | |

Explanation of Responses:

/s/ Thomas M. O'Brien, Attorney-in-Fact

07/01/2010

** 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.