FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
	3233-0201									

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

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1. Name and Address of Reporting Person* GAYNER THOMAS SINNICKSON					2. Issuer Name and Ticker or Trading Symbol Colfax CORP [CFX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
GAYN	<u>ER THU</u>	MAS SINNIC	KSUN		1			<u></u> L \	J						X	Direc	ctor		10% C	wner
(Last) 4521 HIC	st) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 09/30/2016										Offic belov	er (give title w)		Other (below)	(specify
					4. If	Ame	endment.	Date o	of Original	Filed	(Month/Da	ay/Yea	ır)	6.	Indiv	idual o	r Joint/Group	o Filino	(Check A	pplicable
(Street) GLEN A	LLEN V	A 2	23060			4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) <mark>X</mark>	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate) (Zip)													Pers	OH			
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	eficia	ally	Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ar)	2A. Deemed Execution Date, f any Month/Day/Year)		Transaction Dispose Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3,			4 and Se Be Ov		ecurities eneficially		vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		A) or D)	Price	Trans		action(s) 3 and 4)			(111501.4)
Common	Stock, par	value \$.001		09/30)/2016	5			A		478 A \$0.00 40,787 D									
		Та	able II - D					•	•	•	sed of, onvertib				y Ov	vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, T	4. Transa Code (8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				rative irity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	, D	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisal		Expiration Date	Title	of	nber res						

Explanation of Responses:

Remarks:

/s/ A. Lynne Puckett, Attorney-10/03/2016

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.