FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								

37 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 S	ectio	on 30(h)	of the I	nvestme	ent Co	mpany Act	of 19	40							
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 Issue (Check all applicable)						
<u>OTTTT</u>		IVII IO OII VI VI	<u> </u>												X	Direc	ctor		10% C	wner
(Last) 4521 HIC	`	irst) S PARKWAY	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/12/2009											Office below	er (give title v)		Other below)	(specify
,					4. If	Ame	ndment,	Date o	f Origina	al File	d (Month/Da	ay/Ye	ar)			idual o	r Joint/Group	Filing	(Check A	pplicable
(Street)															ne)	_	e	_		
GLEN ALLEN VA 23060				X									Form filed by One Reporting Person							
																Form Pers	n filed by Moi on	re than	One Rep	orting
(City)	(5	State)	(Zip)																	
		Tab	le I - Nor	-Deriv	ative	Sec	curitie	s Acc	quired	, Dis	posed o	f, o	r Ben	eficia	ally	Owne	ed			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.						4 and S		5. Amount of Securities Beneficially Owned Following Reported		nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price	,	Transa	action(s) 3 and 4)			(111501.4)
Common	Stock, par	value \$.001		05/12	/2009				А		7,389)	A	\$	0	1	4,219	D		
		Т	able II - D								osed of, onvertib				y Ov	vned				
1. Title of Derivative Security (Instr. 3)	2. Conversior or Exercise Price of Derivative Security		3A. Deeme Execution or) if any (Month/Day	Date, T	4. Transac Code (I 8)		5. Nu of Deriv Secu Acqu (A) oi Dispo of (D) (Instr and 5	ative rities ired osed	6. Date Expirati (Month/	on Da		Am Sec Und Der	Am or	of es ng /e (Instr. 3		rative rity . 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	vnership orm: rect (D) Indirect	Beneficial Ownership (Instr. 4)
			1				1	1	Date		Expiration	1		Number					1	

(A) (D) Exercisable Date

Explanation of Responses:

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

Title Shares

05/14/2009

** 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.