FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Wash

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-02		

OMB Number:	3235-028								
Estimated average burden									
hours per response:	0.								

## 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 Se	ection	30(h)	of the I	nvestme	ent Co	mpany Act	of 194	10							
1. Name and Address of Reporting Person <sup>*</sup> <u>Wienbar Sharon L</u>				2. Issuer Name and Ticker or Trading Symbol Colfax CORP [ CFX ]												o of Reportin olicable) ctor	g Perso	n(s) to Is		
(Last) (First) (Middle) 420 NATIONAL BUSINESS PARKWAY 5TH FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 09/28/2018											Office below	er (give title v)		Other ( below)	specify		
(Street) ANNAPO JUNCTIO	ON M		20701 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year) 10/02/2018						. Indiv ine) X	Form	or Joint/Group Filing (Check Applicable in filed by One Reporting Person in filed by More than One Reporting son							
		Tabl	e I - Non-D	Deriva	tive	Seci	uritie	s Acc	quired	, Dis	posed o	f, or	Ben	efici	ally (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transa Date (Month/Date)			ate	Execution			n Date,	Code (Ins		5)				4 and Secu Bene		cially I Following	6. Own Form: I (D) or I (I) (Inst	Direct ndirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	· v	Amount		(A) or (D)	Price	•	Transa (Instr. 3	ction(s) 3 and 4)			
Common Stock, par value \$.001 09/28.			09/28/2	/2018			A		555(1)	555 <sup>(1)</sup> A		\$0.	13,686(1)		,686(1)	I	)			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
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/Yea	ate, Ti	Code (Inst				6. Date Expirat (Month	on Dat		Amount of		str. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Owne Form Direct or Ind (I) (In:	nership m: ect (D) ndirect Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				c	ode '	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nui of	ount nber ires						

## **Explanation of Responses:**

1. Due to an administrative error, the Form 4 initially filed on October 2, 2018 inadvertently reported an incorrect number of Director Stock Units (DSUs) acquired under our Director Deferred Compensation Plan. The number of DSUs reflected as acquired in the original filing was overreported by 20. This amendment is being filed to reflect the correct grant amount.

## Remarks:

/s/ A. Lynne Puckett, Attorney- 10/09/2018 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.