## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEF	ICIAL O	<b>WNERSH</b>	IΡ

OMB AF	PPROVAL
OMB Number:	3235-028

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

<u> </u>					
OMB Number:	3235-0287				
Estimated average bu	rden				
hours per response:					

1. Name and Address of Reporting Person* <u>Teirlinck Didier P</u>				2. Issuer Name <b>and</b> Ticker or Trading Symbol Colfax CORP [ CFX ]								Relationshi Check all ap	plicable)	ng Person(s) to	Issuer			
(Last) 420 NAT 5TH FL0	NATIONAL BUSINESS PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 12/31/2019								Offic belo	er (give title w)	Otho belo	er (specify w)	
(Street) ANNAPO JUNCTIO	OLIS ON M		20701 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							ne) X Forr Forr	ridual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Tabl	e I - Nor	n-Deriv	vative	Sec	uritie	s Acc	quired,	Dis	posed o	f, or	Bene	ficia	ally Own	ed		
1. Title of Security (Instr. 3)  2. Tran- Date (Month				action 2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed C Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4			nd Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 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 12/3:			1/2019	)			A		585		A	\$ <del>0</del> .	00 1	5,857	D			
	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)	Derivative Security Conversion Date Execution Date, (Month/Day/Year) Execution Date, if any			4. Transa Code ( 8)		tion of E			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)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber				

**Explanation of Responses:** 

Remarks:

/s/ Bradley Tandy, Attorney-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.