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Form 4											
February 26, 2015 FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSIO									OMB APPROVAL		
	UNITED) STATES			AND EX 1, D.C. 2(NGE C	OMMISSION	OMB Number:	3235-0287	
Check th if no lon subject to	s box ger STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Expires: Estimated a	January 31, 2005 verage	
Section 1 Form 4 c	SECURITIES						burden hours per response 0				
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17	(a) of the		tility Hol	lding Co	npan	y Act of	e Act of 1934, 1935 or Section 0	I		
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Kiefaber Clay			2. Issuer Name and Ticker or Trading Symbol Colfax CORP [CFX]				ng	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Chee				(Check	k all applicable)			
420 NATIC PARKWAY	(Month/Day/Year) 02/25/2015					X_ Director 10% Owner X_ Officer (give title Other (specify below) below) ESAB Global CEO & EVP - Colfax					
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
ANNAPOL JUNCTION	LIS J, MD 20701							Form filed by M Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-	Derivative	Secu	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			3.4. Securities AcquiredTransactior(A) or Disposed of (D)Code(Instr. 3, 4 and 5)(Instr. 8)				5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)			
9				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock, par value \$.001	02/25/2015			S <u>(1)</u>	4,602	D	\$ 53.205 (2)	104,221	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Amou Unde Secur	le and unt of rlying rities : 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Kiefaber Clay 420 NATIONAL BUSINESS PARKWAY 5TH FLOOR ANNAPOLIS JUNCTION, MD 20701	х		ESAB Global CEO & EVP - Colfax				
Signatures							
/s/ A. Lynne Puckett, Attorney-in-Fact	02/26/20	15					
<u>**</u> Signature of Reporting Person	Date						

Explanation of Responses:

- * 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).
- (1) The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on December 12, 2014. These shares were sold to meet tax obligations relating to the delivery of performance-based restricted stock units.

(2) The price reported in this row of Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$52.98 to \$53.34 inclusive. The reporting person undertakes to provide to Colfax Corporation, any security holder of Colfax Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each seperate price within the ranges set forth in footnote (2) to this Form 4.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.