FORM 4	
Check this box if no	Ī

(Print or Tr

Check this box if no	1
longer subject to	
Section 16. Form 4 or	
Form 5 obligations	
may continue. See	
Instruction 1(b).	

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Ations *S. See* 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

(Print or Type Responses	s)												
1. Name and Address of ALBERS MURREY	2. Issuer Name an COLUMBIA SP			•••		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
(Last) C/O COLUMBIA SI COMPANY, 14375			3. Date of Earliest Transaction (Month/Day/Year) 02/28/2017							her (specify belo	w)		
PORTLAND, OR 97		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 Form filed by More than One Reporting Person					
(City)	(State)	(Zip)		Table I - No	on-D	erivative	Securi	ties Acqui	uired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if	(Instr. 8)		4. Secur (A) or D (Instr. 3, Amount	isposed 4 and 5 (A) or	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership		
Common Stock		02/28/2017		М		3,536	А	\$ 32.465	26,838	D			
Common Stock		02/28/2017		S		3,536	D	\$ 55.2752	23,302	D			
Common Stock									400	Ι	By Wife		

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

Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
	2.		3A. Deemed	4.	5. Number 6. I			6. Date Exercisable and		7. Title and		8. Price of	9. Number of		11. Nature
	Conversion		Execution Date, if	Transact	action of			Expiration Date		Amount of				Ownership	
		(Month/Day/Year)		Code				(Month/Day/Yea	ır)			-			Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))		urities			Securities		· /	-		Ownership
	Derivative						uired			(Instr. 3 and	14)				(Instr. 4)
	Security					(A)							0	Direct (D)	
						of (posed						Reported Transaction(s)	or Indirect	
							tr. 3, 4,						(Instr. 4)	(I) (Instr. 4)	
						and							(insu: i)	(Instr. 1)	
							/				Amount	1			
											or				
									Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				
Employee															
G 1							2 526			Common					
Option	\$ 32.465	02/28/2017		М			3,536 (1)	05/17/2008(2)	05/16/2017	Stock		\$ 32.465	0	D	
(right to	<u>(1)</u>	02,20,2017					Ш	00.1	00,10,2017	SLOCK	2,250	\$ 52.105		2	
buy)															

Reporting Owners

Derrorting Orman Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
ALBERS MURREY R C/O COLUMBIA SPORTSWEAR COMPANY 14375 NW SCIENCE PARK DRIVE PORTLAND, OR 97229	Х							

Signatures

Peter J. Bragdon, Attorney-in-Fact	03/02/2017
**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) On September 26, 2014 the option price and number of shares were adjusted to reflect COLM 2-for-1 stock split.

(2) On 5/17/07 the reporting person was granted 3,536 stock options. The option grant vests one-third of the shares on the first three anniversaries of the grant date.

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.