FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ngton, D.C. 20549	OMB APPROVAL

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## 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

Name and Address of Reporting Person*     WHITE MICHAEL D				2. Issuer Name <b>and</b> Ticker or Trading Symbol KIMBERLY CLARK CORP [ KMB ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
WHITE MICHAEL D					1										Directo	or		10% Ov	vner		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 01/02/2019									Officer below)	(give title		Other (s	specify		
P.O. BOX 619100				"	01/02/2013																
1,0,2011 010100					4 16	A If Amondment Date of Original Filed (Month/Day/March)									6. Individual or Joint/Group Filing (Check Applicable						
						If Amendment, Date of Original Filed (Month/Day/Year)									Line)						
(Street)														X Form filed by One Reporting Person							
DALLAS	S T2	X .	75261-910												Form filed by More than One Reporting Person						
(City)	(S	tate) (	(Zip)			1 0301															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of S	Security (Inst	tr. 3)		2. Transa	ction		2A. Deem		3.			ities Acquir			5. Amou				7. Nature		
				Date (Month/D	ay/Ye	Execution Date ay/Year)   if any			Transaction Disposed Of (D) (Instr Code (Instr. 5)			str. 3, 4	and	Securitie Benefici				of Indirect Beneficial			
					(Month/Day/Yea								Owned I Reporte				Ownership (Instr. 4)				
								Code	V	Amount	(A) or (D) Pri		ice	Transac (Instr. 3	ction(s)			(111311. 4)			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
			(€	e.g., pu	uts,	calls	s, warr	ants	s, options	s, c	onverti	ble secu	uritie	s)							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Securities				f s g Secur	E	. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
	Security						sed 3, 4	(Instr. 3 and 4)													
				Г						Т		Am		unt							
													or Numl	oer							
				,	Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	of Share								
D				-	-540	_	(-)	(5)		+		-100	O.I.d.	-							
Restricted Share Units	(1)	01/02/2019			A		1,789		(1)		(1)	Common Stock	1,78	39	(1)	7,192.569	97	D			

## **Explanation of Responses:**

1. Represents restricted share units, payable on a 1-for-1 basis, granted under the Kimberly-Clark Corporation 2011 Outside Directors' Compensation Plan. Additional restricted share units are accrued based on dividends paid on the Corporation's Common Stock. The restricted share units may not be sold or transferred until the reporting person ceases to be a member of the Corporation's Board of Directors.

/s/ Jeffrey S. McFall as attorney-in-fact for Michael D. 01/03/2019 White

\*\* 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.