FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATE	MENT (OF C	HANG

OMB APPROVAL ES IN BENEFICIAL OWNERSHIP

3235-0287 Estimated average burden hours per response 0.5

Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

1. Name and Address of Reporting Person* Gottung Lizanne C						2. Issuer Name and Ticker or Trading Symbol KIMBERLY CLARK CORP [KMB]									k all applica Director	able)	g Perso	on(s) to Issu 10% Ov	vner	
(Last) (First) (Middle) 1400 HOLCOMB BRIDGE ROAD						3. Date of Earliest Transaction (Month/Day/Year) 07/26/2016								X	below)	Officer (give title below) SVP & Chie		Other (s below) Officer	specify	
(Street) ROSWE (City)		A tate)	30076- (Zip)	-2199	4.	If Ame	ndme	nt, Date	of Orig	inal Fi					Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Та	ble I -	Non-Dei	rivativ	/e Se	curi	ties A	cquir	ed, C	Disposed (of, or E	Benef	icially	Owned					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			d 5)	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect g (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common	Stock			07/26/	2016				M		6,204	A	\$75	.2203	2203 11,79		D			
Common	Stock			07/26/	2016				S		6,204	D	\$132	.1676(1)	5,593.456			D		
Common	Stock														12,481.36			I	401(k) and Profit Sharing Plan ⁽²⁾	
			Table								sposed of s, converti				wned		,	,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code (8)				Expiration I (Month/Day			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e O s Fe ally D or g (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	ode V		(D)	Date Exer	cisable	Expiration e Date	Title	or Nu of	nount mber ares		(Instr. 4)	wide)			
Stock Option (Right to Buy)(3)	\$75.2203 ⁽⁴⁾	07/26/2016			M			6,204 ⁽⁴)	(5)	05/05/2022	Comm		204(4)	\$0.0000	12,407	(4)	D		

Explanation of Responses:

- 1. This transaction was executed in multiple trades at prices ranging from \$132.16 to \$132.19. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 2. Shares are held by the trustee of the Kimberly-Clark Corporation 401(k) and Profit Sharing Plan and beneficially owned by the reporting person as of recent practicable date.
- $3.\ Employee\ stock\ option\ granted\ under\ the\ Kimberly-Clark\ Corporation\ 2011\ Equity\ Participation\ Plan.$
- 4. All historical share and stock option exercise price data in this Form 4 have been adjusted to reflect the Corporation's spin-off of its wholly owned subsidiary Halyard Health, Inc. on October 31, 2014. The adjustments were made to preserve the intrinsic value of the reporting person's stock options existing prior to the spin-off.
- 5. The stock option was granted on May 02, 2012 and is fully vested and exercisable.

/s/ Jeffrey S. McFall as attorney 07/27/2016 in fact for Lizanne C. Gottung

** Signature of Reporting Person

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.