UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPRO | VAL |
|---------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average b | urden |
| hours per response | . 0.5 |

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

| Print or Typ | e Responses |) | | | | | | | | | | | | | | | | |
|---|----------------|----------------------|--------------------|---|-----------------------------|--|---|------------------------|---|---|-------------------------------------|-------------------------------------|---|---|--|--------------|---|------------|
| Name and Address of Reporting Person * KELLY DAVID M | | | | 2. Issuer Name and Ticker or Trading Symbol MATTHEWS INTERNATIONAL CORP [MATW] | | | | | | | | TW1 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
| (Last) | | (First) | | 3. Date of Earliest Transaction (Month/Day/Year) 08/09/2004 | | | | | | X Officer (give title below) Other (specify below) President & CEO | | | | | | | | |
| | | (Street) | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. _x | 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | |
| (City) |) | (State) | (Zip) | | | Ta | able I - | Non-De | rivati | ve S | ecurities | Acquire | d, D | isposed | of, or Bene | ficially Own | ed | |
| 1.Title of Se (Instr. 3) | 3) Date | | Date | 2A. Deemed Execution Date, if any (Month/Day/Year) | | if | 3. Trans Code (Instr. 8 | 3) | 4. Securities Acq (A) or Disposed (Instr. 3, 4 and 5) (A) or Amount (D) | | isposed of 4 and 5) (A) or | | | ving Reported) | | Direct (D) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Class A Co | ommon Sto | ock | 08/09/2004 | | | | M | | 3,30 | 0 | A \$ | 3.98 | 41,5 | 524 | | 1 | D | |
| Class A Co | ommon Sto | ock | 08/09/2004 | | | | S | | 3,30 | 0 | D \$ | 33.50 | 41,5 | 524 | | 1 | D | |
| Class A Co | ommon Sto | ock | 08/10/2004 | | | | M | | 92,3 | 00 | A \$ | 3.98 | 41,524 | | 1 | D | | |
| Class A Co | ommon Sto | ock | 08/10/2004 | | | | S | | 92,3 | 00 | D \$3 | 33.94 | 41,5 | 524 | |] | D | |
| Reminder. R | export on a se | parate file for each | Table II - I | Derivativ | e Secu | ritie | es Acqui | Perso conta form | ons vained disp | l in t lays d of, | this forr s a curre , or Bene | n are no ently val ficially O | t re id O | quired t | of informa to respon ntrol numl | d unless th | | 474 (9-02) |
| 1. Title of | 2. | 3. Transaction | 3A. Deemed | e.g., puts. | | | | | | | | 7. Title | and | | 8 Price of | 9. Number o | f 10. | 11. Nature |
| Derivative Security (Instr. 3) | Conversion | | Execution Date, if | Transac Code | tion of Do See (A Di (E (Ir | eriva ecuri equi () or ispos | Expiration Date (Month/Day/Year) Expiration Date (Month/Day/Year) See (In Seed of Say 4, Say 4) | | Amoun Underly Securiti | Amount of Jnderlying Securities Instr. 3 and 4) | | | Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owners Form of Derivat Security Direct (or Indir | ship of Indirect f Beneficial Ownership y: (D) | | | |
| | | | | Code | V (A | ١) | | Date Exercisa | ible | Exp Dat | piration se | Title | | Amount or Number of Shares | | | | |
| Employee Stock Option | \$ 13.98 | 08/09/2004 | | М | | 3 | 3,300 | 03/16/2 | 2002 | 03/ | /16/2009 | Class Comm Stock | ion | 3,300 | \$ 13.98 | 110,267 | D | |
| Employee Stock Option | \$ 13.98 | 08/10/2004 | | М | | 9 | 2,300 | 03/16/2 | 2002 | 03/ | /16/2009 | Class Comm Stock | on | 92,300 | \$ 13.98 | 17,967 | D | |

Reporting Owners

| D | Relationships | | | | | | | |
|--------------------------------|---------------|-----------|-----------------|-------|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | |
| KELLY DAVID M | X | | President & CEO | | | | | |

Signatures

Option

| David M. Kelly | 08/11/2004 |
|-------------------------------|------------|
| 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).

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.