# FORM 4

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

OMB APPROVAL					
DMB Number:	3235-0287				
Estimated average burden					
ours per respon	se 0.5				

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					4, and 5)	Dat	e	Expiration	n	Amount or Number				
Security (Instr. 3)	2. 3. Transaction Date Date Or Exercise Price of Derivative Security		Year) Execution Da	Code Year) (Instr. 8)	of and Comparison of Compariso		Date Exercisable d Expiration Date Month/Day/Year)		Amo Und Secu	ount of Der derlying Sec		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form of Derivativ Security: Direct (D or Indirect	O) ct
indirectly.				Derivative Securiti		the ted, D	tained in form dis	n this for splays a of, or Ben	rm ard curre	e not req ntly valid	uired to re	nformation espond unlo	ess	C 1474 (9- 02)
Reminder:	Common St		for each class of seco	urities beneficially of	F(1)	ectly o	817 or	11)	16.35	21,021			D	
				(Month/Day/Tear)	Code	V	Amoun	\ \	Price	,			Instr. 4)	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	ction	(A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)			Following n(s)	Ownership of Form:	. Nature f Indirect Beneficial Ownership
PITTSBU (City)	JRGH, PA	15212 (State)	(Zip)	Tat	ole I - Nor	-Der	ivative S	ecurities	Acqui	Form file		orting Person One Reporting P Beneficially		
(Last) (First) (Middle) TWO NORTHSHORE CENTER (Street)			Date of Earliest Transaction (Month/Day/Year)     11/09/2014      If Amendment, Date Original Filed(Month/Day/Year)					6. Individ		Group Filing		le Line)		
1. Name and Address of Reporting Person * Jensen Paul C.			2. Issuer Name and Ticker or Trading Symbol MATTHEWS INTERNATIONAL CORP [MATW]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X Officer (give title below)  President, Marking and Fulfill						

Other

### **Signatures**

Jensen Paul C.

Paul C. Jensen	11/12/2014
Signature of Reporting Person	Date

Reporting Owner Name / Address

TWO NORTHSHORE CENTER PITTSBURGH, PA 15212

### **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).
- $\textbf{(1)} \ \ \textbf{Sale} \ \ \textbf{of shares} \ \ \textbf{to the registrant} \ \ \textbf{to covertax} \ \ \textbf{withholdings} \ \ \textbf{on the vesting} \ \ \textbf{of restricted shares}$

Director

10% Owner

Officer

President, Marking and Fulfill

#### Remarks:

See attached "Footnotes" page

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.