# FORM 4

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

OMB APPROVAL						
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stimated average burden						
ours per response 0.5						

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

1. Name and Address of Reporting Person *- NICOLA STEVEN F			2. Issuer Name and Ticker or Trading Symbol MATTHEWS INTERNATIONAL CORP [MATW]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 11/14/2015							X Officer (give title below) Other (specify below)  CFO, Secretary & Treasurer				
(Street)			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 - Non-Derivative Securities Acqui							ired, Disposed of, or Beneficially Owned				
1.Title of Security 2. Transaction Date (Month/Day/Ye			2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)  (A) or		of (D)			ted	6. Ownership Form: Direct (D) or Indirect (I)	Beneficial Ownership	
Class A C	ommon Sto	ock	11/14/2015			Code F(1)	V	Amoun 6,400	D	Price \$ 56.22	136 685 D				
Class A C	Class A Common Stock 11/16/2015		11/16/2015			F(1)		5,035	35 D \$ 56.0		136,685			)	
												ed to respor control num		9	
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	Code	5. Nu of Deriv Secu	umber	form red, Dis	posed o convert Exercisa on Date	f, or Bene ible secur ble and	ently verticially ities) 7. Tit Amou Unde Secur	Owned cle and unt of crlying	control num	ber.		Benefic Owners
Derivative Security	Conversion or Exercise Price of	Date	3A. Deemed Execution Date, if any	4. Transaction Code	5. No on of Deriv Secu Acqu (A) of Disp (D)	umber vative varities uired or osed of r. 3, 4,	form  red, Dis  ptions,  6. Date I  Expiration	posed o convert Exercisa on Date	f, or Bene ible secur ble and	ently verticially ities) 7. Tit Amou Unde Secur	Owned the and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially	f 10. Ownersl Form of Derivati Security Direct (1 or Indire	of Indire Benefic Owners (Instr. 4
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	(e.g., puts, c 4. f Transactic Code (Instr. 8)	5. No on of Deriv Secu Acqu (A) o Disp (D)	arrants, oumber varive unities uired or osed of r. 3, 4, 5)	form  red, Dis  ptions,  6. Date I  Expiration	sposed of convert Exercisa on Date Day/Yea	f, or Bene ible secur ble and	ently verticially ities) 7. Tit Amou Unde Secur	Owned  cle and unt of orlying rities	8. Price of Derivative Security (Instr. 5)	F 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	f 10. Ownersl Form of Derivati Security Direct (I or Indirects)	of Indire Benefic Owners (Instr. 4

# **Signatures**

NICOLA STEVEN F

Reporting Owner Name / Address

Steven F. Nicola	11/18/2015
**Signature of Reporting Person	Date

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Director

10% Owner

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Officer

CFO, Secretary & Treasurer

- (1) Sale of shares to the registrant to cover tax withholds on the vesting of restricted shares.
- (2) The transaction represents the forfeiture of employee stock options, granted under the Company's 1992 Stock Incentive Plan, which did not meet a stock price performance target prior to the expiration of the option term.

Other

#### 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.