FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
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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).

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

(Print or Typ	e Responses)															
1. Name and Address of Reporting Person *- Walters Brian D				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					
TWO NORTHSHORE CENTER (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 11/14/2015								X Officer (give title below) Other (specify below) VP and General Counsel					
(Street) PITTSBURGH, PA 15212				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							es Acqui	Lired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year			2A. Deemed Execution Date, if any (Month/Day/Year)		, if Coo	(Instr. 8)		4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		of (D)					ip of Be	Nature Indirect neficial wnership	
						(Code	V	Amoun	(A) or (D)	Price				or Indire (I) (Instr. 4)	ct (In	str. 4)
Class A C	ommon Sto	ock	11/14/2015			1	F ⁽¹⁾		2,555	D	\$ 56.22	39,570			D		
Class A C	Class A Common Stock 11/16/2015					1	F(1)		2,307 D \$ 56.02		\$ 56.02	39,570			D		
Reminder, F	report on a si	eparate fine for eac	h class of securities Table II - I		-		•	Perso conta form	ons wh ained in display	n this for	rm are r rently v	not requir alid OMB	on of inforn ed to respo control nur	nd unless t		C 147	74 (9-02)
	1_		,	e.g., puts,				_							21.0		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	rsion Date Execution Date, if Code Code (Month/Day/Year) (Month/Day/Year) (Instr. 8) Execution Date (Month/Day/Year) Expiration Date (Month/Day/Year) Securities Acquired		Amou Under Securi	8. Price of 9. Number Derivative Securities (Instr. 3 and 4) 8. Price of 9. Number Derivative Security (Instr. 5) 8. Price of 9. Number Derivative Securities Gecurity (Instr. 5) 9. Number Derivative Securities Gecurities Following Reported Transaction (Instr. 4)			Owner Form Deriv Secur Direct or Inc	of rative rity: t (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)							
				Code	V (Α) (Ε	Ex	ate xercisal		epiration ate	Title	Amo or Num of Share	oer				
Employee Stock Option	\$ 37.29	11/16/2015		D		4,1 (2		1/16/2	008 11	/16/201	Class 5 Comr Stoo	non 4,16	\$ 37.29	0	I)	

Reporting Owners

Barrandina Orania Nama / Addusa	Relationships						
Reporting Owner Name / Address	Director 10% Own		Officer	Other			
Walters Brian D TWO NORTHSHORE CENTER PITTSBURGH, PA 15212			VP and General Counsel				

Signatures

Brian D Walters	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).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Sale of shares to the registrant to cover tax withholdings on the vesting of restricted shares.
- 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.

Remarks:

See attached "footnotes" page.

 $Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, {\it see}\ Instruction\ 6 for procedure.$

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.