FORM 4

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

OMB APPROVAL					
OMB Number: 3235-0287					
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ours per response	e 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 NT	e Responses	D	•	2 Inner	Now-	and Tister	on Tag 41.	o Crass	1	5	Relationshir	of Reporti	ng Person(s)	to Iccuer	
Name and Address of Reporting Person – DUNN BRIAN J			2. Issuer Name and Ticker or Trading Symbol MATTHEWS INTERNATIONAL CORP [MATW]						ATW]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
			3. Date of Earliest Transaction (Month/Day/Year) 06/14/2016							X Officer (give title below) Other (specify below) EVP, Strategy and Corp. Develo					
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)							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)	Table I - Non-Derivative Securities Acqu			s Acquire	uired, Disposed of, or Beneficially Owned							
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)		n Date	, if Code (Instr. 8			4. Securities Acquire (A) or Disposed of ((Instr. 3, 4 and 5)		Owned Follow ransaction(s)			6. Ownership Form:	Beneficial	
			(Month/Day/Yea		Code	e V	Amount (A) or (D) Price		Price	(Instr. 3 and 4)				Ownership (Instr. 4)	
Class A Co	ommon Sto	ock	06/14/2016			М		10,333	A	\$ 40.56	57,187			D	
	ommon St	ock	06/14/2016			S		13,333	(11)	\$ 54.25 6	51,187			D	
		eparate line for eac	h class of securities	beneficia	lly owr	ed directly	Perso	ns wh	this for	m are no	collection ot required lid OMB co	to respon	d unless th		1474 (9-02
Class A Co		eparate line for eac	Table II -	Derivativ	e Secu	rities Acqu	Perso conta form	ons who lined in display	n this for /s a curr f, or Bend	m are no ently val	ot required lid OMB co	to respon	d unless th		1474 (9-02
Reminder: R	2. Conversion	3. Transaction	Table II -	Derivativ (e.g., puts 4. Transac Code	re Secus, 5. 5. ction D B S A (4	rities Acqu warrants, Number erivative ecurities cquired a) or isposed of	Perso conta form	ons who lined in display posed of converting exercisal on Date	this for ys a curr f, or Bendible secur ble and	rm are not rently value eficially Orities) 7. Title Amoun Underly Securiti	ot required lid OMB co Owned and to of ying ies 3 and 4)	to respond ntrol numbers	d unless th	of 10. Owners Form of Derivati Security Direct (or Indire	11. Na of Indi Benefi Owner (Instr.
Reminder: R 1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II -	Derivativ (e.g., puts 4. Transac Code	re Secus, 5. 5. ction D B S A (4	rities Acqu warrants, Number erivative ecurities cquired t) or isposed of 0) nstr. 3, 4,	Perso conta form ired, Disp options, of 6. Date E Expiration	posed of converting the converting to the converting the convertin	this for ys a curr f, or Bendible secur ble and	rm are not rently value eficially Orities) 7. Title Amoun Underly Securiti	ot required lid OMB co Owned and at of ying ies	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners Form of Derivati Security Direct (or Indirects)	11. Na of Indi Benefi Owner (Instr.

D	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
DUNN BRIAN J			EVP, Strategy and Corp. Develo			

Signatures

Brian J. Dunn	06/16/2016
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.