FORM 4	1
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(D

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

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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 Po Marsh Robert M (Last) (First) TWO NORTHSHORE CENTE	2. Issuer Name an MATTHEWS IN [MATW] 3. Date of Earliest 01/31/2018	NTERNA	TIO	NAL C	ORP	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner Officer (give title below) Other (specify below) VP and Treasurer					
(Street) PITTSBURGH, PA 15212	4. If Amendment, I	Date Origir	nal Fi	led(Month	/Day/Year	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City) (State)	(Zip)	Tabl	le I - Non-l	Deriv	vative Se	curities	Acqui	ired, Disposed of, or Beneficially Owned			
1. Title of Security (Instr. 3)		Execution Date, if	Code (Instr. 8)		(A) or Disposed of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form:	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)	
Class A Common Stock	01/31/2018		Р		1,000	А	\$ 55.5	17,207	D		
Class A Common Stock	01/31/2018		P 615 A \$55.4		17,822	D					

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)																			
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.	. Nun	nber	6. Date Exercisable		6. Date Exercisable		6. Date Exercisable		7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n oi	f	and Expiration Date		Amo	unt of	Derivative	Derivative	Ownership	of Indirect					
Security	or Exercise	(Month/Day/Year)	any	Code	D	eriva	ative	tive (Month/Day/Year)		(Month/Day/Year) Under		erlying	Security	Securities	Form of	Beneficial			
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	S	ecuri	ties	s		Securities		(Instr. 5)	Beneficially	Derivative	Ownership				
	Derivative				А	cqui	red			(Instr	r. 3 and		Owned	Security:	(Instr. 4)				
	Security				(/	A) or				4)			Following	Direct (D)					
					D	Dispos	sposed					Reported	or Indirect						
					0	f (D)	D)						Transaction(s)	(I)					
					(I	nstr.	3,	,					(Instr. 4)	(Instr. 4)					
					4,	, and	d 5)												
											Amount								
								D	E intim		or								
								Date Exercisable	Expiration Date	Title	Number								
								Exercisable	Date		of								
				Code V	7 (.	A)	(D)				Shares								

Reporting Owners

	Relationships									
Reporting Owner Name / Address	Director 10% Owner		Officer	Other						
Marsh Robert M TWO NORTHSHORE CENTER PITTSBURGH, PA 15212			VP and Treasurer							

Signatures

/s/ Brian D. Walters (Attorney-in-Fact)	02/02/2018
-**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).

The Power of Attorney dated November 17, 2017 was filed on February 1, 2018, in Form 4, and is incorporated herein by reference

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.