

(Print or Type Responses)

1. Name and Address of Reporting

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL			
OMB	3235-		
Number:	0104		
Estimated average			
burden hours per			
response	0.5		

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

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

GARCIA TUNON ALVARO	,	n/Day/Year)	MATTHEWS INTERNATIONAL CORP [MATW						
(Last) (First) (Middle) TWO NORTHSHORE CENTE		10/28/2009		Person(s) to I	ip of Reporting		5. If Amendment, Date Original Filed(Month/Day/Year)			
PITTSBURGH, PA 15212				(Check _X_ Director Officer (given title below)	all applicable) ye 10% Ov Other (s below)	vner specify	filing(Ch X_Form f Form fi	dual or Joint/Group neck Applicable Line) filed by One Reporting Person filed by More than One Reporting		
(City) (State) (Zip)		Tal	ole I	 - Non-Derivati	ve Securities		erson icially	Owned		
1.Title of Security (Instr. 4)		Ben		t of Securities lly Owned		Ownersl	nip	irect Beneficial		
Class A Common Stock		0			D					
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02 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. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Dat (Month/Day/Year)		on Date			4. Conversion or Exercise Price of	Form	ership of vative	(Instr. 5)		
Date Exe	oate exercisable	Expiration Date	Title	Amount or Numb of Shares	Derivative Security	Secur Direct or Ind (I) (Instr	t (D) direct			
Reporting Owners										

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
GARCIA TUNON ALVARO						
TWO NORTHSHORE CENTER	X					
PITTSBURGH, PA 15212						

Signatures

Alvaro Garcia-Tunon	10/29/2009
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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.