# FORM 4

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

OMB APPROVAL					
DMB Number:	3235-0287				
Estimated average burden					
ours per response 0.5					

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

1 31													
Print or Type Responses)  1. Name and Address of Reporting Person * Ciccone Jennifer Ann			2. Issuer Name and Ticker or Trading Symbol MATTHEWS INTERNATIONAL CORP [MATW]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X Officer (give title below) Other (specify below)						
(Last) (First) (Middle) TWO NORTHSHORE CENTER			3. Date of Earliest Transaction (Month/Day/Year) 11/09/2011					VP,	Human Reso	ources			
(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 PersonForm filed by More than One Reporting Person						
(City	·)	(State)	(Zip)	Table I - Non-Derivative Securities Acqu				tired, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	(A) (D)	(A) or Disposed of		d 5. Amount of Securiti Beneficially Owned F Reported Transaction (Instr. 3 and 4)		Following (s)	Ownership Form:	7. Nature of Indirect Beneficial Ownership
					Code	V Am	ount (D)	Price				(I) (Instr. 4)	(III3ti. 4)
Class A C	Common S	tock	11/09/2011		A(1)	4,50	00 A	\$ 0	23,300			D	
Reminder:	Report on a	senarate line fo	or each class of secu	rities beneficially o	wned direc	tly or							I
Reminder: indirectly.	Report on a	separate line fo	or each class of secu	rities beneficially o	ļ	Persons containe	l in this fo	rm ar	e not req	uired to re	formation espond unlo	ess	EC 1474 (9- 02)
	Report on a	separate line fo	Table II - D	rities beneficially o	es Acquire	Persons containe the form d, Dispose	d in this fo displays a d of, or Be	orm ar curre	e not required in the second i	uired to re	spond unl	ess	,
1. Title of	2. Conversion	3. Transaction	Table II - Defense of the second of the seco	derivative Securitic e.g., puts, calls, war 4. Transaction Code Year) (Instr. 8)	es Acquire rrants, opt	Persons contained the form d, Disposed ions, conversed and Expired the properties of	d in this for displays and of, or Be ertible sec tercisable ation Date	neficia urities) 7. T Am Uno Sec	e not required in the second i	uired to red OMB con	spond unl	of 10. Ownersh Form of Derivatii Security Direct (I or Indire	11. Nature of Indirect Beneficial Ownership (Instr. 4)

### **Reporting Owners**

	D (1 0 N / 1 1	Relationships				
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
,	Ciccone Jennifer Ann IWO NORTHSHORE CENTER PITTSBURGH, PA 15212			VP, Human Resources		

### **Signatures**

Jennifer A Ciccone	11/14/2011
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).

Award of restricted stock under the Company's 2007 Equity Incentive Plan, subject to the agreement entered into under the Plan. In general, 50% of the shares vest on November 9, 2014, subject to continuing employment at that time. The remaining 50% of the shares vest in increments of one-third upon the stock price of the Company (1) reaching 105%, 115% and 125% of the price of the Company's common stock on the date of the award for ten consecutive trading days, respectively, and in any event no earlier than one year from the date of the grant, subject to continuing employment at that time. Shares that do not achieve the stock price thresholds on or before November 9, 2016 will be forfeited.

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.