FORM 4

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

OMB APPROVAL							
DMB Number:	3235-0287						
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ours per response							

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 Ty	pe Response	s)																
Name and Address of Reporting Person * Dempe Charles Michael				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) 500 GRANT AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 11/13/2013									President	, Brand Solu	utions Ame		
(Street)					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					
EAST BU	UTLER, PA	16029												Form file	ed by More than	One Reporting	Person	
(City	<i>i</i>)	(State)	(Z	ip)			Tal	ble I -	Non-	Deri	vative S	ecuritie	s Acqu	ired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)		2. Transa Date (Month/D	Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		tion	(A) or I		of (D)			Following	Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
								Co	de	V	Amoun	(A) or (D)	Price				or Indirect (I) (Instr. 4)	Instr. 4)
Class A	Common St	ock	11/13/20	013				A	1)		2,100	A	\$ 0	14,689			D	
Class A Common Stock 11/			11/14/20	013				F	<u>2)</u>		198	D	\$ 40.76	14,689			D	
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/	on 3A. Exe	A. Deemed recution Date,	Derivative Securi 2.g., puts, calls, w 4. Transaction Code Year) (Instr. 8)		tion	ties Acquire arrants, op 5. Number		ed, Disposed of tions, converted of the Exercised (Month/Day/		of, or Be tible sec cisable on Date	7. T Am Und Sec		8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	of 10. Ownersh Form of Derivativ Security: Direct (I or Indire	Ownershi (Instr. 4) O)
						Code	V	4, and (A)	(D)	Date Exe	e rcisable	Expirati Date	on Titl	Amount or e Number of Shares				
Repoi	ting O	wners						<u> </u>					_	<u>'</u>				
						Relati	ionsl	hips										
Reporting	Owner Nan	ne / Address	Director	10% Own	ner C	officer						Other						
Dempe Charles Michael 500 GRANT AVENUE EAST BUTLER, PA 16029				President, Brand Solutions Ame														

Signatures

C. Michael Dempe	11/15/2013
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 2012 Equity Incentive Plan, subject to the agreement entered into under the Plan. In general, 50% of the shares vest on November 13, 2016, subject to continuing employment at that time; 25% of the shares vest in increments of one-third upon the stock price of the Company 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 25% of the shares vest in

- (1) increments of one-third upon the adjusted earnings per share of the Company reaching \$2.69, \$2.91 and \$3.14; 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 13, 2018 will be forfeited. Shares that do not achieve the adjusted earnings per share thresholds on or before November 13, 2016 will be forfeited.
- (2) Sale of shares to the registrant to cover tax withholdings on the vesting of restricted shares.

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.