Mistras Group, Inc. Form 4 May 02, 2016

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

| 2. Issuer Name and Ticker or Trading Symbol Mictres Group, Inc. [MG] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|--|--|--|--|--|
| 3. Date of Earliest Transaction | | | | |
| (Month/Day/Year) 10/21/2015 | _X_ Director 10% Owner _X_ Officer (give title Other (special below) | | | |
| 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 Form filed by More than One Reporting Person | | | |
| | Symbol Mistras Group, Inc. [MG] 3. Date of Earliest Transaction (Month/Day/Year) 10/21/2015 4. If Amendment, Date Original | | | |

| (City) | (State) | (Zip) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |
|--------|---------|-------|--|
|--------|---------|-------|--|

| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | 3. Transactio | 4. Securities Acon(A) or Disposed | • | 5. Amount of Securities | 6. Ownership Form: Direct | 7. Nature of Indirect |
|------------------------|--------------------------------------|-------------------------------|------------------|-----------------------------------|-------------|-------------------------|---------------------------|-----------------------|
| (Instr. 3) | | any | Code | (Instr. 3, 4 and : | 5) | Beneficially | (D) or | Beneficial |
| | | (Month/Day/Year) | (Instr. 8) | | | Owned | Indirect (I) | Ownership |
| | | | | | | Following | (Instr. 4) | (Instr. 4) |
| | | | | (4) | | Reported | | |
| | | | | (A) or | | Transaction(s) | | |
| | | | Code V | Amount (D) | Price | (Instr. 3 and 4) | | |
| Common Stock | 10/21/2015 | | F | 523 <u>(1)</u> D | \$ 18.74 | 242,344 | D | |

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transact Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | : | ate | Amou Under Secur | le and unt of rlying rities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|--------------------------------------|--------------------------------------|---|---------------------|--------------------|------------------------|--|---|---|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | | | |
|---|----------------------------|----|-----------------------------|-------|
| . 9 | Director 10% Owner Officer | | | Other |
| Lange Michael J. C/O MISTRAS GROUP, INC. 195 CLARKSVILLE ROAD PRINCETON JUNCTION, NJ 08550 | X | | Vice Chairman and Group EVP | |
| Signatures | | | | |
| Michael C. Keefe, attorney-in-fact for Lange | Michael | J. | 05/02/2016 | |

Explanation of Responses:

**Signature of Reporting Person

- * 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).
- (1) Represents shares withheld for payment of tax liability as a result of the partial settlement of a restricted stock unit award granted on October 22, 2014.

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.

Date

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