Explanation of Responses:

FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

ОМВ	APPROVAL

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

06/02/2020

Date

Amount or Number

Shares

/s/ Michael C. Keefe, attorney

in fact for Jonathan H. Wolk ** Signature of Reporting Person

of

Title

to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).				iled pursua	pursuant to Section 16(a) of the Securities Exchange Act of 1934								den 0.5		
1. Name and Address of Reporting Person [*] Wolk Jonathan H			2. Iss	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol Mistras Group, Inc. [MG]						(Ch				Dwner	
	(Fir STRAS GR(ARKSVILL				3. Date of Earliest Transaction (Month/Day/Year) 06/01/2020						X Officer (give title Other (specify below) below) Sr. EVP and COO				
(Street) PRINCE JUNCTI (City)	ON ^{NJ}	-	8550 Zip)	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	ndividual or Joint/Group Filing (Check Applicable) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - Non-Dei	ivative S	Secu	rities Acq	uired,	Dis	oosed of,	or Ber	neficia	lly Own	ed		
1. Title of Security (Instr. 3) 2. Transac Date			saction	24 1	Deemed	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			5. Amo		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
1. Title of	Security (ins	(r. 3)	Date	h/Day/Year)	Exec if an	ution Date,	Transa Code (Disposed Of			d Securit Benefic Owned	ies cially Following	Form: Direct (D) or Indirect	of Indirect Beneficial Ownership
1. Title of		(r. 3)	Date		Exec if an	ution Date, y	Transa Code (Disposed Of			d Securit Benefic Owned Report	ies cially Following ed ction(s)	Form: Direct (D) or Indirect	of Indirect Beneficial
1. Title of S		rr. 3)	Date (Mont		Exec if an	ution Date, y	Transa Code (8)	Instr.	Disposed Of 5)	f (D) (Instr	r. 3, 4 an	d Securit Benefic Owned Report Transa (Instr. 3	ies cially Following ed ction(s)	Form: Direct (D) or Indirect	of Indirect Beneficial Ownership
			Date (Mont 06/ Dle II - Deriv	h/Day/Year) 01/2020 vative Se	Exec if any (Mor	:ution Date, y ith/Day/Year)	Transa Code (8) Code F ired, C	v Dispo	Disposed Of 5) Amount 3,104 ⁽¹⁾ osed of, o	f (D) (Instr (A) or (D) D r Bene	Price \$4.04	d Securit Benefic Owned Report Transau (Instr. 3 4 10 y Owned	ies sially Following ed ction(s) 8 and 4) 8,150	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

1. Represents shares withheld for payment of tax liability as a result of the vesting of restricted stock units.

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

** 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.

Code v

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 Number.

and 5)

(A) (D) Date

Exercisable

Expiration Date