FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	Check this box if no longer subject to
١	Section 16. Form 4 or Form 5
J	obligations may continue. See
	Instruction 1(h)

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. Name an		2. Issuer Name and Ticker or Trading Symbol Mistras Group, Inc. [MG]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)												
<u>Lange I</u>	1										X	Direc	ctor	10	10% Owner								
(Last)	ast) (First) (Middle)																		Other (specify below)				
C/O MIS	TRAS GRO	OUP. INC.	ŕ			3. Date of Earliest Transaction (Month/Day/Year) 03/08/2013									Group EVP, Services								
195 CLARKSVILLE ROAD						05, 05, 2015																	
	ICICO VILLI	_																					
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable Line)						
PRINCE'	N	NJ 0855		00											X	Form	m filed by One Reporting Person						
JUNCTIO	JN															Form filed by More than One Reporting Person							
(City)	(St	ate) (Zip)																				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																							
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day)						Exec if an	Deemed ution Date, / th/Day/Year)					s Acquired (A) or of (D) (Instr. 3, 4 a			nd 5) Secu Ben Own		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ct c	7. Nature of Indirect Beneficial Ownership			
										v	Amount	(A (D) or)	Price	Reported Transaction(s) (Instr. 3 and 4)		action(s)			(Instr. 4)			
Common	2013				S		10,000(1)	D \$22.0		04 ⁽²⁾ 422,512		22,512	D										
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	ion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Dat (Month/Day/Ye		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		f g		ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	hip (E D) (ect (11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Nu of	ımber									

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 19, 2012.
- 2. The price on this line represents the weighted average price for the transactions reported on this line. The range of prices for the transactions reported on this line was \$22.00 to \$22.11. Upon request by the Commission staff or a security holder of the issuer, the full information regarding the number of shares sold at each separate price shall be provided. The information has been provided to the issuer.

Michael C. Keefe, attorney-infact for Michael J. Lange 03/11/2013

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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.