FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
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l	hours per response:	0.5							

	Check this box if no longer subject to
٦	Section 16. Form 4 or Form 5 obligations may continue. See
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

Name and Address of Reporting Person* Vahaviolos Sotirios J.						2. Issuer Name and Ticker or Trading Symbol Mistras Group, Inc. [MG]									5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director X 10% Own				
(Last) (First) (Middle) C/O MISTRAS GROUP, INC. 195 CLARKSVILLE ROAD						3. Date of Earliest Transaction (Month/Day/Year) 11/04/2016									Officer (give title below) Chairman and CEO				
(Street) PRINCETON JUNCTION NJ 08550 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv Line) X	Form Form	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/						Execution Date,		Date,	Code (Instr.		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a		and 5) Secu Bene Own		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) c (D)	r Pri	се		action(s) 3 and 4)			(Instr. 4)	
Common	016			S		95,980(1)	D	\$2	20.84(2)	(2) 11,387,231		Γ)						
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)	ative Conversion or Exercise (Month/Day/Year) 3) Price of Derivative Security Execution Date, if any (Month/Day/Year)		Execution Date, r) if any		4. Transaction Code (Instr. B)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Sec (Ins	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owr Forr Dire or Ir (I) (I	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	er							

Explanation of Responses:

- 1. Sale of stock to the issuer pursuant to an August 17, 2016 agreement between the issuer and the reporting person. The terms of the agreement are described in a Current Report on Form 8-K filed by the issuer with the Commission on August 18, 2016.
- $2.\ Price\ is\ 98\%\ of\ the\ average\ closing\ price\ for\ each\ of\ the\ trading\ days\ in\ October\ 2016,\ as\ provided\ in\ the\ agreement\ described\ in\ footnote\ 1.$

Remarks

This filing is being made to file a power of attorney evidencing the authority of the person signing the original filing to execute the report on behalf of the reporting person.

Michael C. Keefe, attorney-infact for Sotirios J. Vahaviolos

** Signature of Reporting Person D

11/07/2016

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.