## FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	0

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

WNERSHIP

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*     Graass James H						2. Issuer Name and Ticker or Trading Symbol EAGLE MATERIALS INC [ EXP ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify				Owner	
(Last) 3811 TU: STE #110	RTLE CRE	rst) EK BLVD.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/11/2016								X	X Officer (give title Other (specify below) below)  EVP & General Counsel				
(Street) DALLAS	S T2		75219		4. If	Lin								6. Indi Line) X					
(City)	(St		(Zip)	on Deriv	ative	Sac	uritio	νε Λ <i>α</i>	auirec	LDid	enosad o	f or F	Ronofi	cially	Own				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,		3. 4. Secu		4. Securities	sed of, or Beneficia ecurities Acquired (A) or posed Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) o (D)	r Pric	е	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 05			05/11/2	2016				F		365	D	\$77	7.34 <sup>(1)</sup>	61	,873(2)	D			
Common	Stock														1 438 1 1 1			By 401(k)	
Common Stock														543		I		By Reporting Person's IRA	
	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 Execution Date, if any (Month/Day/Year) (Month/Day/Year)  3. Transaction Date Execution Date, if any (Month/Day/Year) (Month/Day/Year)					6. Date Exercisable and Expiration Date (Month/Day/Year)		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Der Sed (Ins	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amour or Number of Shares	er					

## **Explanation of Responses:**

- 1. In accordance with the issuer's Amended and Restated Incentive Plan, this price represents the closing price per share of Common Stock on the previous trading day.
- 2. 365 shares were withheld by the issuer to satisfy income tax withholding requirements related to the lapsing of restrictions on 871 shares of restricted stock awarded to the reporting person on 6/10/2015 (Form 4 filed on 5/10/2016). Because the reporting person's restricted stock holdings have been included in the direct ownership of Common Stock disclosed by the reporting person, the reporting person's direct ownership of Common Stock has been reduced by 365 shares to reflect this tax withholding.

## Remarks:

/s/ James H. Graass

\*\* Signature of Reporting Person

05/13/2016

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.