FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL

OMB Number: Estimated average burden hours per response: 0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

1. Name and Address of Reporting Person* NICOLAIS MICHAEL R						2. Issuer Name and Ticker or Trading Symbol EAGLE MATERIALS INC [EXP]								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 3811 TURTLE CREEK BLVD., SUITE 250					3. Date of Earliest Transaction (Month/Day/Year) 05/07/2014									Officer (give title Other (specify below) below)						
(Street)	·			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	e) <mark>X</mark> Forn	up Filing (Check A one Reporting Pers fore than One Rep		son			
(City)	(St	ate)	(Zip)												1 613011					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			A) or , 4 and	or 5. Amount of Securities Beneficially Owned Followin Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or F	Price	Transac (Instr. 3	tion(s)			(111501.4)	
Restricted Common Stock Units ⁽¹⁾ 05/07/					/2014	.014			A		4.5569	A		\$0 ⁽¹⁾	3,772.674		D			
Common Stock														9	,780	D				
Common	Stock														1,	,550	I		By Profit Sharing Plan of Reporting Person's Employer	
Common Stock															3,	.500	I		By Reporting Person's IRA	
Common Stock													1,386		I	- 1	By wife's IRA			
Common Stock															!	555	I		By wife as custodian for daughter ⁽²⁾	
Common Stock													555		I		By wife as custodian for son ⁽²⁾			
			Table II -								osed of,				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year	3A. Deer Execution	ned n Date,	4. Transact Code (In		5. Number ion of		6. Date Exerci Expiration Da (Month/Day/Yo		sable and te	7. Title Amour Securi Underl Deriva Securi	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Own Form Direct or In (I) (Ir		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amo or Num of Shar	ber						

Explanation of Responses:

/s/ Scott M. Wilson as Attorney-in-Fact for Michael

05/09/2014

R. Nicolais

** Signature of Reporting Person

Date

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

^{1.} The grant reported above represents Restricted Common Stock Units ("RSUs") accrued in connection with a cash dividend paid by Issuer on its Common Stock and as a result of certain dividend equivalent rights associated with the reporting person's existing RSUs.

^{2.} These shares are held by wife as custodian for the reporting person's children. The reporting person disclaims beneficial ownership of these securities, and the filing of this report is not an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 of the Exchange Act or for any other purpose.

^{*} 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.