FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)																
Name and Address of Reporting Person * Steinriede Anthony				2. Issuer Name and Ticker or Trading Symbol MUELLER INDUSTRIES INC [MLI]							5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 8285 TOURNAMENT DRIVE, SUITE 150					3. Date of Earliest Transaction (Month/Day/Year) 07/30/2015								X_Office	er (give title bele VP - (ow) Corporate Co	Other (specify ontroller	below)	
(Street)				4. If A	4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
	IS, TN 38	(State)	(7:m)															
(City	,	(State)	(Zip)			Ta	ble I	- Non	-Der	ivative S	Securitie	es Ac				Beneficially		1
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execu		med on Date, if	(Instr. 8)		tion	(A) or Disposed of (Instr. 3, 4 and 5)		(D) Beneficia Reported		ant of Securities ally Owned Following d Transaction(s)		Ownership of Form:	Beneficial		
			(Month/Day/Year)			ode	V	Amount	(A) or t (D)	Prio	Ì	(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	ct (Instr. 4)			
Common	Stock		07/30/2015					F	•	210	D	\$ 32.	2	3,391			D	
			Table II -					quire	the f d, Di	orm dis	splays a of, or Be	a cur enefic	rrent cially	tly valid		spond unle rol numbe		` '
Security	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Da any	ate, if	4. Transaction Code (Instr. 8)		5. Number		and Expiration Date (Month/Day/Year)			7 A U S	7. Titl Amou Jnder Securi	le and int of rlying ities 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owner Form of Deriva Securit Direct or Indi	f Beneficial Ownership y: (D) rect
					Code	V	(A)	(D)	Date Exer		Expiration Date	on T	Γitle	Amount or Number of Shares				

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Steinriede Anthony 8285 TOURNAMENT DRIVE SUITE 150 MEMPHIS, TN 38125			VP - Corporate Controller						

Signatures

Anthony Steinriede	08/03/2015			
**Signature of Reporting Person	Date			

Explanation of Responses:

- * 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.