FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	OVAL					
	OMB Number:	3235-0287					
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l	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

					UI	Sec	1011 30(11) 01 111	ie ilive	25tilleli	it Coi	прапу Асі	01 13-	+0							
1. Name and Address of Reporting Person* <u>Sproule Scott William</u>						2. Issuer Name and Ticker or Trading Symbol SPX CORP [SPXC]										Relationship eck all appli Directo	cable) or	g Pers	10% Ow	ner	
	(F CORPOR BALLAN			of Earlic	est Tra	nsacti	ion (Mo	onth/i	Day/Year)		helow)	Officer (give title below) VP, CFO and		Other (s below) easurer	pecify						
(Street) CHARLOTTE NC 28277					4. 1	4. If Amendment, Date of 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					
(City)	2)	·	(Zip)	n-Deriv	/ativ		curit		cani	——	Die	nosed c	of or	Ban	eficial	ly Owner	<u> </u>				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transar Date (Month/D:					action Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		e, [3. Transaction Code (Instr		4. Securities Acquired Disposed Of (D) (Instr		I (A) or	5. Amou Securitie Benefici Owned I	nt of es ally -ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Ī	Code	v	Amount		(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			Instr. 4)	
Common Stock 01/05/										D ⁽¹⁾		5,100)	D	\$0	102	,124 ⁽²⁾		D		
Common Stock 01/05										F ⁽³⁾		1,680		D	\$23.7	2 100	444(2)		D		
Common Stock																2,	2,087			401(k) Plan	
			Table II -									osed of, onverti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Day	Date,	4. Transactio Code (Inst 8)		of Deri Secu Acqu (A) o Disp of (E	osed) r. 3, 4	6. Date Exercisal Expiration Date (Month/Day/Year				7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e O s Fe ally D or g (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)	
					Code	v				Date Exercisable		expiration Date			Amount or Number of Shares						
Employee stock option to purchase common stock	\$12.36								10/13	3/2018 ⁽⁻	(4) 1	0/13/2025	Com Sto		83,168		83,16	8	D		
Employee stock option to purchase common	\$12.85								03/0	2/2019 ⁽⁾	(5)	3/02/2026	Com Sto		46,729		46,72	9	D		

Explanation of Responses:

- $1. \ For feiture \ of \ restricted \ stock \ under \ the \ SPX \ Corporation \ 2002 \ Stock \ Compensation \ Plan.$
- 2. Includes unvested restricted stock units.
- 3. Shares delivered to the issuer for the payment of withholding taxes due upon the vesting of restricted stock previously granted under the SPX Corporation 2002 Stock Compensation Plan.
- 4. Vests as to 100% of the shares on the third anniversary of the grant date.
- 5. Vests in three equal installments beginning on March 2, 2017.

Stefanie Holland, Attorney In Fact for Scott William Sproule 01/0

01/09/2017

** 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.