FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF	CHANGES	IN BE	NEFIC	IAL	OWNE	RSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average bu	urden							
hours por rosponso:	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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Reilly Michael Andrew					2. Issuer Name and Ticker or Trading Symbol SPX CORP [SPXC]								eck all applic	cable) or	10% Own		ner	
(Last) (First) (Middle) C/O SPX CORPORATION 13320-A BALLANTYNE CORPORATE PLACE				3. Date of Earliest Transaction (Month/Day/Year) 08/29/2016								X Officer (give title below) Other (specify below) Corp. Controller and CAO						
15520-A BALLANT THE CORPORATE PLACE			4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) CHARLOTTE NC 28277				, , , , , , , , , , , , , , , , , , ,								Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)											Persor				
		Tab	le I - No	n-Deriv	/ative	e Se	curiti	ies A	cquired	, Di	sposed o	of, or Be	neficial	ly Owned	l			
Date			2. Transa Date (Month/D	ay/Year) if a		2A. Deemed Execution Date, f any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Benefici	es ally Following	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price	Transaci (Instr. 3	tion(s)			1150.4)
Common Stock 08/29/.				/2016	2016		S		2,258	D	\$19.19	(1) 69,8	327 ⁽²⁾	D				
Common Stock											1,	482	I		01(k) Plan			
		٦	Table II								oosed of, converti			Owned	,		•	
1. Title of Derivative Security 2. Conversion or Exercise Price of Derivative Security 1. Title of Derivative Security 2. Security 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/D		n Date,	Date, Transactio Code (Inst			on of I		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owne Form Direct or Ind (I) (Ins	t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab	ole	Expiration Date	Title	Amount or Number of Shares					
Employee stock option to purchase common stock	\$12.36								10/13/201	8 ⁽³⁾	10/13/2025	Common Stock	33,267		33,267	, I)	
Employee stock option to purchase common stock	\$12.85								03/02/201	9 ⁽⁴⁾	03/02/2026	Common Stock	27,664		27,664	ı)	

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$19.15 to 19.27, inclusive. The reporting person undertakes to provide to SPX Corporation, any security holder of SPX Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.
- 2. Includes unvested restricted stock units
- 3. Vests as to 100% of the shares on the third anniversary of the grant date.
- 4. Vests in three equal installments beginning on March 2, 2017.

Stefanie Holland, Attorney In Fact for Michael A. Reilly

08/31/2016

** 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.