FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average I | hurden | | | | | | | | |

0.5

hours per response:

| Ch | eck this box if no longer subject to |
|-----|--------------------------------------|
| Se | ction 16. Form 4 or Form 5 |
| ob | ligations may continue. See |
| Ins | struction 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* <u>Canafax James D</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol BWX Technologies, Inc. [BWXT] | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
|--|-----------|--|---|----------|--|---|------|------------------|------------------------------------|--------|---------------------|--|-------------|--|---|---|---|---|--|--|
| (Last) 800 MAI | ` | irst) Γ, 4TH FLOOR | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/03/2016 | | | | | | | | | | Officer (give title below) See R | | Other (sp below) Lemarks | | |
| (Street) LYNCHI | | | 24504 (Zip) | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| Date | | | | 2. Trans | Transaction ate lonth/Day/Year) | | | emed on Date, | 3. Trans Code | action | 4. Securi | ities Ac | quired | (A) or | 5. Amou Securitie Benefici Owned I | int of es ially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | () | A) or D) | Price | Reporte Transac (Instr. 3 | tion(s) | | | Instr. 4) | |
| Common | non Stock | | | 03/03 | 03/03/2016 | | | | M | | 1,98 | 1 | A | \$0.00 | 0 82 | 82,450 | | \dashv | | |
| Common | Stock | | | 03/03 | 3/2016 | 6 | | | F | | 657 | | D | \$32.4 | 7 81,793 D | | | _ | | |
| Common | Stock | | | | | | | | | | | | | | 2,946 ⁽¹⁾ I | | | | 401(k) Plan | |
| | | 1 | able II - | | | | | | | | osed of converti | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversi or Exerci Price of Derivativ Security | | 3. Transaction Date (Month/Day/Year) | 3A. Deemee Execution I if any (Month/Day | Date, | 4. Transa Code (8) | | n of | | 6. Date E Expiratio (Month/D | n Date |) | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | ly Direct or Inc. (I) (In | 10. Ownership Form: Direct (D) Dir Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | 0 N 0 | amount or lumber of Shares | | | | | | |
| Restricted | \$0.00 | 03/03/2016 | | | M | | | 1,981 | (2) | | 03/03/2017 | Comr | non | 1,981 | \$0.00 | 1,981 | | D | | |

Explanation of Responses:

- 1. Based on number of units held in BWXT Thrift Plan and the fair market value of BWXT common stock as of February 24, 2016.
- $2. \ Restricted \ stock \ units \ vest \ in \ three \ equal \ annual \ installments \ beginning \ March \ 3, \ 2015.$

Remarks:

Stock Unit

Senior Vice President, General Counsel, Chief Compliance Officer and Corporate Secretary

/s/ James D. Canafax, by

Theresa B. Taylor, attorney-in- 03/07/2016

fact

Stock

** 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.