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 bi | urden | | | | | | | | | |

0.5

hours per response:

| | Check this box if no longer subject to |
|---|--|
| ١ | Section 16. Form 4 or Form 5 |
| J | obligations may continue. See |
| | Instruction 1(h) |

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

| Name and Address of Reporting Person* Bertsch Jan | | | | 2. Issuer Name and Ticker or Trading Symbol BWX Technologies, Inc. [BWXT] | | | | | | | | | heck a | all applic | tor er (give title | | 10% O | vner | | |
|---|--|------------|-------------|--|--|-----|----------|-----------------|--|--------|------------------|---|---|---|-----------------------|--|---|--|---------------------------------------|--|
| (Last) (First) (Middle) 800 MAIN STREET | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/06/2019 | | | | | | | | | | Officer below) | | | Other (: below) | specify | | |
| 4TH FLOOR | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) LYNCHBURG VA 24504 | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City) | (S | tate) (| Zip) | | | | | | | | | | | | | | | | | |
| | | Tab | e I - Non-I | Deriva | tive | Sec | curities | s Ac | quired, | Dis | osed o | of, or Be | neficia | lly O | wned | l | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Execution Date, | | | Code (Instr. 5) | | | | nd S B O | . Amou Securitie Seneficia Owned F Reported | es Formially (D) (Following (I) (I | | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | Code | v | Amount | (A) o (D) | (A) or (D) Price | | ransact | action(s) 3 and 4) | | | (111511.4) | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | ivative Conversion Date Execution Date, I urity or Exercise (Month/Day/Year) if any | | | ate, Tr | ransac ode (In | | of E | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | Co | ode | v | (A) | (D) | Date Exercisabl | | xpiration ate | Title | Amount or Number of Shares | | | | | | | |
| Dividend Equivalent Rights | (1) | 09/06/2019 | | | A | | 51.65 | | (1) | | (1) | Common Stock | 51.65 | \$ | \$0 | 646.29 | | D | | |

Explanation of Responses:

1. The dividend equivalent rights accrued on six restricted stock unit grants of which the reporting person has elected to defer receipt of the shares underlying the RSUs. Each RSU and DER represent a contingent right to receive one share of BWXT common stock. In accordance with the deferral election, the DERs will be delivered to the reporting person proportionately with the RSUs to which they relate.

Remarks:

/s/ Jan A. Bertsch, by Theresa 09/10/2019 B. Taylor, attorney-in-fact

** 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.