## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

W	ashington	i, D.C.	20549

<b>STATEMENT</b>	OF CHANGES IN	N BENEFICIAL	OWNERSHIP

	OMB APP	ROVAL							
	OMB Number:	3235-028							
	Estimated average burden								
- 1	hours per response	0.1							

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

Name and Address of Reporting Person*     Installed Building Systems, Inc.					2. Issuer Name and Ticker or Trading Symbol Installed Building Products, Inc. [ IBP ]							all app Dired			X 10% C	)wner			
	(Last) (First) (Middle) C/O INSTALLED BUILDING PRODUCTS, INC. 495 S. HIGH STREET, SUITE 50					3. Date of Earliest Transaction (Month/Day/Year) 10/30/2015							Officer (give title X Other (specify below)  Director by Deputization						
(Street) COLUM (City)			13215 Zip)		- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indiv Line) X	•						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3,				and 5) Sec Ber Ow		urities eficially ned Following		Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) or (D) Price			Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock, \$0.01 par value per share 10/30/20				2015	)15		P		49,120	A	\$21.	\$21.666(1)		3,520,002		D			
Common Stock, \$0.01 par value per share 10/30/20			2015	)15		P		880	A	<b>A</b> \$22.3630		3,520,882			D				
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code ( 8)		5. Numof Derive Securion Acquired (A) or Disposof (D) (Instrand 5	ative rities ired sed	6. Date Expira (Month	ation D h/Day/`		7. Title Amour Securit Under! Derivat Securit and 4)	nt of ties ying	Deri Seco (Inst		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

- 1. The price represents the weighted average purchase price for multiple transactions reported on this line. The prices of the transactions reported on this line range from \$21.30 to \$22.27. The reporting person undertakes to provide, upon request by the Commission staff, the issuer or a security holder of the issuer, full information regarding the number of shares purchased at each separate price.
- 2. The price represents the weighted average purchase price for multiple transactions reported on this line. The prices of the transactions reported on this line range from \$22.33 to \$22.40. The reporting person undertakes to provide, upon request by the Commission staff, the issuer or a security holder of the issuer, full information regarding the number of shares purchased at each separate price.

## Remarks:

/s/ Shelley A. McBride, Attorney-in-Fact for Installed 11/03/2015 Building Systems, Inc.

\*\* 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.