SHEETS JUSTIN D Form 4

August 24, 2017

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

**COMMON** 

STOCK (1)

08/23/2017

(Print or Type Responses)

1. Name and Address of Reporting Person \*

SHEETS JUST	Symbol MATRIX	Symbol MATRIX SERVICE CO [MTRX]				Issuer				
(Last)	(First) (Mi		3. Date of Earliest Transaction			(Check all applicable)				
		(Month/Day	/Year)			Director	10%	Owner		
5100 EAST SI	08/23/201	08/23/2017			_X_ Officer (give below)	e title Othe below)	er (specify			
DRIVE, SUIT						sident, Legal &	Risk			
	4. If Amend	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
		Filed(Month	Filed(Month/Day/Year)				Applicable Line)			
TULSA, OK 7	4135					_X_ Form filed by N Form filed by N Person	One Reporting Per More than One Re			
(City)	(State) (Z	ip) Table l			•.•		0 D (t. 1)			
(enj)	(511110)	Table I	- Non-Der	ivative Sec	curities Acq	uired, Disposed of	t, or Beneficial	ly Owned		
1.Title of	2. Transaction Dat		3.	4. Securit		5. Amount of	6. Ownership			
· · · · · · · · · · · · · · · · · · ·		Execution Date, if	TransactionAcquired (A) or		` ′	Securities	Form: Direct	Indirect		
(Instr. 3)		any	Code	Disposed	` '	Beneficially	(D) or	Beneficial		
		(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and 5)	Owned	Indirect (I)	Ownership		
						Following	(Instr. 4)	(Instr. 4)		
					(A)	Reported Transaction(s)				
					or	(Instr. 3 and 4)				
			Code V	Amount	(D) Price	(msu. 5 and 4)				

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

D

\$ 10 13,316 (3)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

F

356 (2) D

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		nte	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr	
					4, and 5)	Date	Expiration		Amount		
				Code V	(A) (D)	Exercisable	Date	Title	Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SHEETS JUSTIN D 5100 EAST SKELLY DRIVE SUITE 500 TULSA, OK 74135

Vice President, Legal & Risk

## **Signatures**

Justin D. Sheets 08/24/2017

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* 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).
- (1) MATRIX SERVICE COMPANY COMMON STOCK.
- (2) RESTRICTED STOCK UNIT AWARD SHARES DISPOSED TO SATISFY TAX OBLIGATION DUE ON VEST DATE FOR TIME-BASED GRANT.
- (3) INCLUDES 6,508 SHARES OF MATRIX SERVICE COMPANY COMMON STOCK OWNED OUTRIGHT.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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