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MATRIX SE	RVICE CO											
Form 4												
December 02.	, 2016											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE ON Washington, D.C. 20549					NGE CO	MMISSION	OMB AP OMB Number:	PROVAL 3235-0287				
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b).	Filed p snue. STATE	ursuant to s 7(a) of the	ENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES uant to Section 16(a) of the Securities Exchange Act of 1934,) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							January 31, 2005 verage s per 0.5		
(Print or Type R	esponses)											
RYAN JAMES P Sy			Symbol	I. I. South Fitter of Fittering					Relationship of Reporting Person(s) to suer			
<u> </u>					-	MTR	.X]	(Check	all applicable)			
(Last) (First) (Middle) 5100 EAST SKELLY DRIVE, SUITE 100							Director 10% Owner X Officer (give title Other (specify ow) below) President, Matrix Service					
				nth/Day/Year) App			Individual or Joint/Group Filing(Check plicable Line) _ Form filed by One Reporting Person					
TULSA, OK	74135						Per	_ Form filed by Mo rson	re than One Rep	orting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ties Acquir	ed, Disposed of,	or Beneficially	y Owned		
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ate 2A. Deemed r) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired (Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			(D)	Securities Beneficially Owned Following Reported Transaction(s)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(D)	Price \$	(Instr. 3 and 4)				
COMMON STOCK (1)	11/30/2016			S	10,000	D	20.9358 (2)	63,228 <u>(3)</u>	D			

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

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 control number.

 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Under Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address			Relationships			
i o	Director	10% Owner	Officer	Other		
RYAN JAMES P 5100 EAST SKELLY DRIVE SUITE 100 TULSA, OK 74135			President, Matrix Service			
Signatures						
James P. Ryan 12/	/02/2016					

<u>**</u>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.

THE PRICE REPORTED IS A WEIGHTED AVERAGE PRICE. THESE SHARES WERE SOLD IN MULTIPLE TRANSACTIONS AT PRICES RANGING FROM \$20.75 TO \$20.975, INCLUSIVE. THE REPORTING PERSON UNDERTAKES TO PROVIDE TO

- (2) MATRIX SERVICE COMPANY, ANY SECURITY HOLDER OF MATRIX SERVICE COMPANY, 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 RANGE SET FORTH.
- (3) INCLUDES 46,400 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.