# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| vvasiniigtori, | D.C. | 20343 |  |
|----------------|------|-------|--|
|                |      |       |  |
|                |      |       |  |

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

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>AUSTIN NANCY E</u>    |  |      |         |                           |             | 2. Issuer Name and Ticker or Trading Symbol  MATRIX SERVICE CO [ MTRX ]                |        |  |               |   |                    |                                   |                              |  | ationship of Reporting<br>all applicable)<br>Director<br>Officer (give title |  | 10% (                  |             |
|---|--|------|---------|---------------------------|-------------|--|--------|--|---------------|---|--------------------|-----------------------------------|------------------------------|--|--|--|------------------------|-------------|
| (Last) (First) (Middle) 5100 EAST SKELLY DRIVE SUITE 500          |  |      |         |                           |             | 3. Date of Earliest Transaction (Month/Day/Year) 09/17/2018                            |        |  |               |   |                    |                                   |                              |  | belov  | w) ``  | below<br>ervices & Ada | )           |
| (Street) TULSA OK 74135 (City) (State) (Zip)                      |  |      |         |                           | _ 4. II     | 4. If Amendment, Date of Original Filed (Month/Day/Year)                               |        |  |               |   |                    |                                   |                              | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |  |  |                        |             |
|   |  | Tabl | e I - N | lon-Deri                  | /ative      | Sec  | uritie | s Ac   | quire         | d, D  | isposed o          | f, or E                           | Benefici                     | ally (   | Owne   | ed   |                        |             |
| 1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y |  |      |         |                           | Execution D |  | ,      |  |               | Acquired (A) or<br>f (D) (Instr. 3, 4 ar  |                    | nd 5) Seci<br>Ben                 |                              | nount of<br>rities<br>ficially<br>ed Following   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)            | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |                        |             |
|   |  |      |         |                           |             |  |        |  |               | v   | Amount             | (A) or<br>(D)                     | Price                        | Tra  |  | action(s)<br>. 3 and 4)  |                        | (111341. 4) |
| COMMON STOCK <sup>(1)</sup> 09/17/20                              |  |      |         |                           | 018         | 18   |        |  | S             |   | 10,868             | D                                 | \$24.74                      | 4.7428(2)  |  | 7,716 <sup>(3)</sup>   | D                      |             |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |      |         |                           |             |  |        |  |               |   |                    |                                   |                              |  |  |  |                        |             |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)               | tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any   |      |         | ransaction<br>ode (Instr. |             | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |        | 6. Date Exercisable and Expiration Date (Month/Day/Year) |               | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |                    | 8. Pri<br>Deriv<br>Secu<br>(Instr | ative                        | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)  | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4)            | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                        |             |
|   |  |      |         |                           | Code        | v  | (A)    | (D)  | Date<br>Exerc | isable  | Expiration<br>Date | Title                             | or<br>Number<br>of<br>Shares |  |  |  |                        |             |

# **Explanation of Responses:**

- 1. MATRIX SERVICE COMPANY COMMON STOCK.
- 2. THE PRICE REPORTED IS A WEIGHTED AVERAGE PRICE. THESE SHARES WERE SOLD IN MULTIPLE TRANSACTIONS AT PRICES RANGING FROM \$24.50 TO \$25.15, INCLUSIVE. THE REPORTING PERSON UNDERTAKES TO PROVIDE TO 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.
- ${\tt 3.\ INCLUDES\ 22,184\ SHARES\ OF\ MATRIX\ SERVICE\ COMPANY\ COMMON\ STOCK\ OWNED\ OUTRIGHT.}$

# Remarks:

<u>Nancy E. Austin</u> <u>09/18/2018</u>

\*\* 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.