FORM 4

obligations may continue. See

Instruction 1(b)

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	205/19
vvasiliilytuii,	D.C.	20049

STATEMENT	OF	CHANGES	IN

OMB APPROVAL I BENEFICIAL OWNERSHIP

OMB Number: 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* TURNER JASON W						2. Issuer Name and Ticker or Trading Symbol MATRIX SERVICE CO [MTRX]								Check all ap		10% (Person(s) to Issuer 10% Owner Other (specify		
	ast) (First) (Middle) 100 EAST SKELLY DRIVE UITE 500						3. Date of Earliest Transaction (Month/Day/Year) 08/27/2018								X Officer (give title Other (specify below) President, MNAC				
(Street) TULSA (City)	OI (St		74135 Zip)		4. If A	mendm	ent, Date (of Original Filed (Month/Day/Year)						. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,				es Acquired (A) o Of (D) (Instr. 3, 4 a			d 5) Secu Bene	ties F cially (I Following (6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code	v	Amount	(A) or (D) Pri		Price	Trans	action(s) 3 and 4)		(111341. 4)		
COMMON STOCK ⁽¹⁾ 08/27/2					/2018	2018		A		6,938(2)	A 9		\$0	\$0 ⁽³⁾ 44,889		D			
COMMON STOCK ⁽¹⁾ 08/27/				/2018	2018		A		1,933(4) A :		\$0	(3)	46,822	D				
COMMON STOCK ⁽¹⁾ 08/29/3					2018		F		880(5)		D \$21.325		325 4	5,942 ⁽⁶⁾	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)	tion 3A. Deen	n Date,	4. Transact Code (In 8)	tion of or other str. S	Number f erivative ecurities cquired A) or isposed f (D) nstr. 3, 4 nd 5)	6. Date Exerci Expiration Dat (Month/Day/Ye		te	or		ı	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. MATRIX SERVICE COMPANY COMMON STOCK.
- 2. RESTRICTED STOCK UNIT EACH UNIT WILL ENTITLE THE REPORTING PERSON TO ONE SHARE OF MATRIX SERVICE COMPANY COMMON STOCK IF AND WHEN THE CONDITIONS OF THE RESTRICTION HAVE BEEN SATISFIED. FOR THIS GRANT, 25% WILL VEST EACH YEAR FOR THE NEXT FOUR YEARS ON THE ANNIVERSARY DATES.
- 4. RESTRICTED STOCK UNIT EACH UNIT WILL ENTITLE THE REPORTING PERSON TO ONE SHARE OF MATRIX SERVICE COMPANY COMMON STOCK IF AND WHEN THE CONDITIONS OF THE RESTRICTION HAVE BEEN SATISFIED. THIS AWARD WAS EARNED UNDER THE COMPANY'S SHORT-TERM INCENTIVE COMPENSATION PLAN FOR FISCAL 2018 SAFETY PERFORMANCE AND WILL VEST ON THE FIRST ANNIVERSARY DATE OF THE AWARD.

(A) (D) Exercisable Date

- 5. RESTRICTED STOCK UNIT AWARD SHARES DISPOSED TO SATISFY TAX OBLIGATION DUE ON VEST DATE FOR TIME-BASED GRANT.
- 6. INCLUDES 22,745 SHARES OF MATRIX SERVICE COMPANY COMMON STOCK OWNED OUTRIGHT.

Remarks:

08/29/2018 Jason W. Turner

** 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.