FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

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

							()				1 7										
Name and Address of Reporting Person* Name and Address of Reporting Person*							2. Issuer Name and Ticker or Trading Symbol MATRIX SERVICE CO [MTRX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
SHEETS JUSTIN D						MILITAL SERVICE CO [WITKY]										Director		10% O	wner		
(Last) (First) (Middle)							2. Data of Farling Transporting (Marth (Day))									Officer (give title below)		Other (below)	(specify		
(Last)	(Fi		3. Date of Earliest Transaction (Month/Day/Year)										Vice Preside	nt L	egal & Ris	k					
5100 EAST SKELLY DRIVE							11/13/2016									vice i reside	п, п	regui & rus			
SUITE 100																					
2011E 100						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
-					- 4. "	4. II Amenument, Date of Original Filed (Month/Day/Year)									b. Individual of Joint/Group Filing (Check Applicable Line)						
(Street)															,	Form filed by O	ne Re	enorting Pers	on		
TULSA	OI	Κ	74135													X Form filed by One Reporting Person Form filed by More than One Reporting					
					-											Form filed by M Person	ore th	nan One Rep	orting		
(City)	(C+	oto) /	7in)													. 6.5611					
(City)	(31	ate) (Zip)																		
		Tab	le I - Nor	n-Deriv	ative/	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	eficia	ally O	wned					
1. Title of S	Security (Inst	r. 3)		2. Trans	saction	Execution Date,			3.									6. Ownership	7. Nature		
				Date	lDay/Va					Code (Instr. 5)		Disposed Of (D) (Instr. 3, 4				ecurities eneficially		Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership		
				(WIOTILII			if any (Month/Day/Year)									wned Following					
					Ι΄				·			, (A) or D				eported ransaction(s)	"		(Instr. 4)		
							۱v	Amount	- 18	(D) Price		(Instr. 3 and 4)									
601010	NI CTOCK	2/201/	/2016			F		107(2	2) D 61		Ф10		10 (70(3)	_							
COMMON STOCK ⁽¹⁾ $11/13/$											107(2	D \$18		3.9 13,672 ⁽³⁾			D				
		T/	able II - E	Orivat	ivo S	0011	ritios	Λοαιι	irod Di	cno	cod of	or D	onofi	الدند	, Owr	nod					
		10									onvertib				y Ovvi	ieu					
1. Title of	2.	3. Transaction	3A. Deem	ed	4.		5. Number		6. Date Ex	6. Date Exercisable and			tle and		8. Price	of 9. Number	of	Ownership	11. Nature of Indirect		
Derivative	Conversion	Date (Month/Day/Year)	Execution	Date,	Transa					Expiration Date			Amount of		Derivat Securit						
Security (Instr. 3)	or Exercise Price of		if any (Month/Day/Year)		Code (Insti		r. Derivative (Securities		(Month/D					Securities Underlying		y Securities Beneficiall	v I	Form: Direct (D)	Beneficial Ownership		
(Derivative			,,	-,		Acqu	Acquired					vative		(Owned	'	or Indirect	(Instr. 4)		
Security						(A) or Disposed of (D)			Security (Instr and 4)				str. 3		Following Reported		(I) (Instr. 4)				
															Transactio	n(s)					
							(Instr. 3, 4 and 5)									(Instr. 4)					
							anu 5)														
													Amo	ount							
											Expiration		Nun	nber							
					Code	v	1,00		Date			Title	of								
	I	1	I		Code	V	(A)	(D)	Exercisal	ոe լե	Date	little	Sha	res							

Explanation of Responses:

- 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 5,732 SHARES OF MATRIX SERVICE COMPANY COMMON STOCK OWNED OUTRIGHT.

Remarks:

Justin D. Sheets

11/14/2016

** 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.