## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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: 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*  RYAN JAMES P						2. Issuer Name and Ticker or Trading Symbol MATRIX SERVICE CO [ MTRX ]											k all app Dired	olicable) ctor	ng Pe	Person(s) to Issuer  10% Owner	
(Last) 5100 E S	,	(First) (Middle) KELLY DRIVE STE 700					3. Date of Earliest Transaction (Month/Day/Year) 10/23/2009										belov	cer (give title Other (spe below)  President MSI			
Street) TULSA OK 74135 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Indi Line) X	Forn Forn	dual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Tabl	le I - Noi	n-Deriv	ative	Se	curi	ities	s Acq	uired,	Dis	posed o	f, o	r Ber	nefic	ially	Owne	ed			
1. Title of Security (Instr. 3)  2. Transa Date (Month/L						2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transa Code ( 8)						4 and Secu Bene Own		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount		(A) or (D)	Pri	ce	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Common Stock <sup>(1)</sup> 10/23/										А		1,650 <sup>©</sup>	2)	A	1	SO <sup>(6)</sup>	25,626			D	
Common Stock <sup>(1)</sup> 10/23						3/2009				A		8,000	3)	A	1	SO <sup>(6)</sup>	33,626			D	
Common Stock <sup>(1)</sup> 10/23/						3/2009						436(4)		D	\$9.56		33,190		D		
Common Stock <sup>(1)</sup> 10/23/						/2009				F		87(5)		D	\$	9.56	33,103 <sup>(7)</sup>		D		
		Та	able II - I (									sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transa Code ( 8)	Instr	n of Derivative (Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E Expiratio (Month/D	n Date	9	7. Title and Amount of Securities Underlying Derivative Security (Instand 4)  Amount of Numl of Title Shart		moun	Der Sec (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)		10. 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. Release of Restricted Stock Unit award as predetermined performance criteria was met.
- 3. 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, 20% will vest each year for the next five years on the anniversary dates.
- 4. Restricted Stock Unit award shares disposed to satisfy tax obligation due on vest date for performance based grant.
- 5. Restricted Stock Unit award shares disposed to satisfy tax obligation due on vest date for time based grant.
- 6. Not applicable
- 7. Includes 19,443 shares of Matrix Service Company Common Stock owned outright.

10/27/2009 James P. Ryan

\*\* Signature of Reporting Person

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.