FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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:t	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL						
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* MILLER JAMES HARRY				2. Issuer Name and Ticker or Trading Symbol MATRIX SERVICE CO [MTRX]											licable)	ng Pei	rson(s) to Is				
(Last)	(Fir	st) (N	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024									Office	er (give title v)		Other (s below)	specify			
15 EAST 5TH STREET SUITE 1100				4. If A	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									
(Street) TULSA	•														Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Z	Zip)		$ _{\Box}$	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Table	I - No	n-Deriva	tive S	Secu	rities	Acc	quired	l, Dis	posed of	, or B	enefic	ially	Own	ed					
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)				(Year) Executi		eemed ition Date, h/Day/Year)					Acquired (A) of (D) (Instr. 3, 4		and 5) Sec Ben Owi		Amount of ecurities eneficially wned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
COMMO	N STOCK	1)		04/01/20	024(2)				A ⁽¹⁾ V 385		A	\$12.9	7(3)	78,933 ⁽⁴⁾			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 Execution Date, if any (Month/Day/Year)			4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) o Dispo of (D (Instr	rities ired r osed)	Expiration De (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		Deri Sec	rice of vative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares								

Explanation of Responses:

- 1. MATRIX SERVICE COMPANY COMMON STOCK PURCHASED VIA THE MATRIX SERVICE COMPANY 2011 EMPLOYEE STOCK PURCHASE PLAN ("THE ESPP") IN A TRANSACTION THAT WAS EXEMPT UNDER BOTH RULE 16b-3(c) AND RULE 16b-3(d) AND IS VOLUNTARILY REPORTED.
- 2. SHARES WERE PURCHASED VIA THE ESPP. THE OFFERING PERIOD CONSISTED OF THE THREE MONTHS ENDED MARCH, 31 2024. THE SHARES WERE ACQUIRED ON THE FIRST DAY AFTER THE END OF THE OFFERING PERIOD.
- 3. PER THE ESPP, THE PURCHASE PRICE WAS DETERMINED BY THE LAST CLOSING CONSOLIDATED BID PRICE PER SHARE ON THE PURCHASE DATE.
- 4. INCLUDES 70,942 SHARES OF MATRIX SERVICE COMPANY COMMON STOCK OWNED OUTRIGHT.

Remarks:

James H. Miller

04/02/2024

** 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.