FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	205/10
vvasiiiiiqtoii,	D.C.	20349

CTATEMENIT	OF CHANGES	IN DENEELOLAL	OVAVALEDOLLID
STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPROVAL										
l	OMB Number:	3235-0287									
l	Estimated average burder	ı									
l	hours per response:	0.5									

	Check this box if no longer subject to
١	Section 16. Form 4 or Form 5
J	obligations may continue. See
	Instruction 1(h)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

											· ·							
Name and Address of Reporting Person* Rinehart Bradley J					2. Issuer Name and Ticker or Trading Symbol MATRIX SERVICE CO [MTRX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
													X	Officer (give title		Other (s	pecify
(Last) (First) (Middle) 5100 EAST SKELLY DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 08/30/2021								President, Matrix Service					
SUITE 100																		
(Street) TULSA	OK	74	1135		4. If .	4. If Amendment, Date of Original Filed (Month/Day/Year)							I	ndividual or Joint/Group Filing (Check Applicable Line X Form filed by One Reporting Person Form filed by More than One Reporting Person				<u> </u>
(City)	(State	e) (Z	ip)															
		Tab	le I - Nor	ı-Deri	vative	e Se	curities	Acq	uired,	Dis	osed of	, or Bene	ficially	Owned				
Date			Date	n/Day/Year) ii		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr.		es Acquired Of (D) (Instr.	(A) or 3, 4 and 5)	5. Amount Securities Beneficial Owned Fo	Forn (D) o		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
COMMON STOCK ⁽¹⁾ 08/3					30/2021				A		9,587 ⁽²⁾ A		\$0 ⁽³⁾	73,869(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	e (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date, y/Year)	4. Transaction Code (Instr. 8)				6. Date Exercisable a Expiration Date (Month/Day/Year)		te	d 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		Derivative Security		er of re es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		Transaction(s (Instr. 4)			
RESTRICTED STOCK UNITS	(5)	08/30/2021			A		9,587 ⁽⁶⁾		08/30/20	022	08/30/2025	COMMON STOCK ⁽¹⁾	9,587	(3)	9,58	37	D	

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.
- 3. NOT APPLICABLE.
- 4. INCLUDES 52,299 SHARES OF MATRIX SERVICE COMPANY COMMON STOCK OWNED OUTRIGHT.
- 5. EACH RESTRICTED STOCK UNIT IS THE ECONOMIC EQUIVALENT OF ONE SHARE OF MATRIX SERVICE COMPANY COMMON STOCK. ALL RESTRICTED STOCK UNITS ARE SETTLED SOLELY IN CASH WHEN VESTED.
- 6. EACH UNIT WILL ENTITLE THE REPORTING PERSON TO THE CASH EQUIVALENT OF 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.

Remarks:

Bradley J. Rinehart

09/01/2021

** 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.