MATRIX SERVICE CO

Form 4

October 01, 2013

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB 3235-0287

OMB APPROVAL

Number:

Expires:

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January 31,

2005

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Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940 See Instruction

1(b).

COMMON

STOCK (1)

09/27/2013

(Print or Type Responses)

1 Name and Address of Departing De

1. Name and Address of Reporting Person * AUSTIN NANCY E				2. Issuer Name and Ticker or Trading Symbol MATRIX SERVICE CO [MTRX]				Iss	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	(Last) 5100 EAST S DRIVE, SUI	SKELLY	(1	3. Date of Earliest Transaction (Month/Day/Year) 09/27/2013					(Check all applicable) Director 10% OwnerX_ Officer (give title Other (specify below) VP Human Resources				
	TULSA, OK	(Street) 74135		4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
	(City)	(State) (Z	Zip)	Table	I - Non-D	erivative (Securi	ties Acquir	ed, Disposed of, o	or Beneficially	y Owned		
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	nsaction Date 2A. Deemed th/Day/Year) Execution Date, is any (Month/Day/Year)			owr Dispo (Instr. 3,	sed of 4 and (A) or	5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
	COMMON STOCK (1)	09/27/2013			Code V	Amount 100	(D)	Price \$ 19.16	35,838	D			
	COMMON STOCK (1)	09/27/2013			S	800	D	\$ 19.1755	35,038	D			
	COMMON STOCK (1)	09/27/2013			S	109	D	\$ 19.1601	34,929	D			
	COMMON STOCK (1)	09/27/2013			S	1,133	D	\$ 19.3438	33,796	D			
								\$					

S

2,710 D

19.3285 31,086

(2)

D

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

SEC 1474

(9-02)

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)	4. Transaction Code (Instr. 8)	of			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date Exercisable	Expiration Date	Title	or Number of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

AUSTIN NANCY E 5100 EAST SKELLY DRIVE

VP Human Resources

TULSA, OK 74135

SUITE 700

Signatures

Nancy E. Austin 10/01/2013

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) MATRIX SERVICE COMPANY COMMON STOCK.
- (2) THE PRICE REPORTED IS A WEIGHTED AVERAGE PRICE. THESE SHARES WERE SOLD IN MULTIPLE TRANSACTIONS AT PRICES RANGING FROM \$19.32 TO \$19.3401, INCLUSIVE. THE REPORTING PERSON UNDERTAKES TO PROVIDE TO MATRIX SERVICE COMPANY, ANY SECURITY HOLDER OF MATRIX SERVICE COMPANY, OR THE STAFF OF THE

Reporting Owners 2

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SECURITIES AND EXCHANGE COMMISSION, UPON REQUEST, FULL INFORMATION REGARDING THE NUMBER OF SHARES SOLD AT EACH SEPARATE PRICE WITHIN THE RANGE SET FORTH.

(3) INCLUDES 10,084 SHARES OF MATRIX SERVICE COMPANY COMMON STOCK OWNED OUTRIGHT.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.