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

l	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burden								
ı	haiira mar raamamaa.	٥٦							

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* <u>Lane Brian E.</u>					2. Issuer Name and Ticker or Trading Symbol COMFORT SYSTEMS USA INC [FIX]									(Chec	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
													X	Dire	ctor	10% (Owner		
					·											er (give title	Other below	(specify	
(Last)	(Fii	,	Middle)					st Trans	saction (Month	/Day/Year)			1	belo	,		′ I	
C/O COMFORT SYSTEMS USA, INC.					04/	04/04/2016								1	President/Chief Executive Off.				
675 BERING DRIVE, SUITE 400																			
					- 4. If	Amer	ndment	, Date o	of Origin	al File	d (Month/Da	ay/Year)	6. Indi	vidual c	r Joint/Group	Filing (Check A	Applicable	
(Street)	N													X	Forn	n filed by One	Reporting Pers	son	
HOUSTO	ON TY	(77057											1		,	e than One Rep	, , , , , , , , , , , , , , , , , , ,	
					-										Pers		e man One Kep	Jording	
(City)	(St	ate) (Zip)																
		Tabl	e I - No	on-Deriv	ative	Sec	uritie	s Ac	quirec	l, Dis	sposed o	f, or	Benef	icially	Own	ed			
Date			2. Transa Date (Month/Da		Execution Date,		Date,	Transaction Code (Instr.		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a				Secur Benef Owne	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D)		ice		rted action(s) 3 and 4)				
Common Stock 04/04/					.016 ⁽¹⁾)16 ⁽¹⁾		F		1,220(2)	I	\$	31.88(3)	1	77,144	D			
Common	Common Stock 04/04/20					16(1)		F		1,801(4)	I	\$	31.88 ⁽³⁾	175,343		D			
Common Stock 04/04/20				.016 ⁽¹⁾	016 ⁽¹⁾		F		2,270(5)	I	\$	31.88 ⁽³⁾	173,073		D				
		Та	ıble II -								osed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	on Date,	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Ins and 4)		Der Sec (Ins	ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Numb of Share	er				

Explanation of Responses:

- 1. Forfeited shares are related to restricted stock units that vested on April 1, 2016 and were priced based on the average of the high and low stock price on April 1, 2016. Forfeitures were processed on April 4, 2016
- $2.\ Reflects\ for feited\ shares\ related\ to\ the\ first\ vesting\ of\ restricted\ stock\ units\ granted\ on\ March\ 25,\ 2015.$
- 3. Price is based on the average of the high and low stock price on April 1, 2016.
- 4. Reflects forfeited shares related to the second vesting of restricted stock units granted on March 19, 2014.
- 5. Reflects forfeited shares related to the third and final vesting of restricted stock units granted on March 20, 2013.

/s/ Trent T. McKenna, by power of attorney 04/05/2016

** 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.