SEC Form 4	
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## 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

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

l	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average bu	urden								

Estimated average burden	
hours per response:	0.5

1. Name and Address of Reporting Person <sup>*</sup> <u>MYERS FRANKLIN</u>			2. Issuer Name and Ticker or Trading Symbol <u>COMFORT SYSTEMS USA INC</u> [ FIX ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner
				Officer (give title v Other (specify
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	below) A below)
C/O COMFORT SYSTEMS USA, INC.			05/22/2018	Chairman of the Board
675 BERING	DRIVE, SUITI	E 400		
(Street) HOUSTON	TX	77057	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by Mare than One Reporting
(City)	(State)	(Zip)	—	Form filed by More than One Reporting Person

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Disposed Of			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 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	05/22/2018		Р		3,500	A	\$46.38(1)	218,500	D	
Common Stock	05/22/2018		A		3,453	A	<b>\$0</b> <sup>(2)</sup>	221,953	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 (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)				6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v			Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

Explanation of Responses:

1. Represents the average price of shares purchased; full information regarding the number of shares purchased and specific prices will be made available upon request to the Company's Office of the General Counsel

2. Shares granted pursuant to the 2017 Omnibus Incentive Plan as approved by stockholders on May 23, 2017. Non-employee directors are given an annual grant of Comfort Systems USA Common Stock following election or reelection at the Company's annual stockholders' meeting. This year's grant is equal to \$160,000 as rounded down to the nearest whole share based on the average of the high and low price of the Company's Common Stock on the day of the annual stockholders' meeting.



Date

05/23/2018

\*\* 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.