FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 0049                 | OMB APP     | OMB APPROVAL |  |  |  |  |
|----------------------|-------------|--------------|--|--|--|--|
| NEELOLAL OVANIEDOLUB | OMB Number: | 3235-0287    |  |  |  |  |

Estimated average burden hours per response: 0.5

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

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*  Mylett James Matthew   |   |  |               |                    |                    | 2. Issuer Name and Ticker or Trading Symbol COMFORT SYSTEMS USA INC [ FIX ] |     |  |                 |          |   |                      |                                   | (Chec   | k all app<br>Dired   | olicable)<br>otor   | g Person(s) to Issuer  10% Owner Other (specify                    |  |  |
|--|---|--|---------------|--------------------|--------------------|---|-----|--|-----------------|----------|---|----------------------|-----------------------------------|---|--|---|--|--|--|
| (Last) (First) (Middle)<br>675 BERING DRIVE, SUITE 400   |   |  |               |                    |                    | 3. Date of Earliest Transaction (Month/Day/Year) 04/04/2016                 |     |  |                 |          |   |                      |                                   | X   | belov  | ,   | below<br>Service   |  |  |
| (Street) HOUSTO  |   |  | 77057<br>Zip) |                    | 4. If              | 4. If Amendment, Date of Original Filed (Month/Day/Year)                    |     |  |                 |          |   |                      |                                   | Line)   | 6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person 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. Transact Date (Month/Day)  |   |  |               | Execution Date,    |                    | 3.<br>Transaction<br>Code (Instr.<br>8)                                     |     | 4. Securities Acquired (A) o<br>Disposed Of (D) (Instr. 3, 4 a |                 |          | or<br>and 5)  | Secur<br>Benef       | icially<br>d Following            | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |   |  |  |  |
|  |   |  |               |                    |                    |   |     | Code   | v               | Amount   | (A) o<br>(D)  | (A) or (D) Price     |                                   | Transaction(s)<br>(Instr. 3 and 4)                                |  |   | (111041. 4)  |  |  |
| Common Stock 04/04/20  |   |  |               | 016(1)             | 016 <sup>(1)</sup> |   | F   |  | 431(2)          | D        | \$3   | 31.88 <sup>(3)</sup> | 12,837                            |   | D  |   |  |  |  |
| Common Stock 04/04/20  |   |  | 016(1)        | )16 <sup>(1)</sup> |                    | F   |     | 508 <sup>(4)</sup> D \$3                                       |                 | 31.88(3) | 88 <sup>(3)</sup> 12,329  |                      | D                                 |   |  |   |  |  |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |  |               |                    |                    |   |     |  |                 |          |   |                      |                                   |   |  |   |  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | Derivative Conversion Date Security or Exercise (Month/Day/Year) if any |  |               |                    |                    |   |     | 6. Date Exercisable a<br>Expiration Date<br>(Month/Day/Year)   |                 | te       | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |                      | Der<br>Sed<br>(Ins                | Price of<br>rivative<br>curity<br>str. 5)                         | 9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)   | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|  |   |  |               |                    | Code               | v   | (A) | (D)  | Date<br>Exercis | able     | Expiration<br>Date  | Title                | Amou<br>or<br>Numb<br>of<br>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,
- 2. Reflects forfeited 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.

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

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.