FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANG	GES IN BENEFIC	IAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average bu	ırden								
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

							_												
Name and Address of Reporting Person* Lance Prince F.					2. Issuer Name and Ticker or Trading Symbol COMFORT SYSTEMS USA INC [FIX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Lane Brian E.				-							:	X Directo	r		10% Ov	vner			
(Last)	(F	irst)	(Middle)		3.	Date o	f Earl	iest Tran	saction (Month	n/Day/Year)	:	X Officer below)	(give title		Other (s below)	specify		
C/O COMFORT SYSTEMS USA, INC.					06	06/05/2020								Presi	ident/Chief Executive Off		f.		
675 BERING DRIVE, SUITE 400																			
0/3 BERING DRIVE, SOITE 400					_ _	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)					_	- 1. Tanchament, Date of Original Fried (Month/Day/Teal)								Line)					
HOUST	ON T	X	77057											X Form f	iled by One	Repo	rting Perso	n	
					_									Form filed by More than One Reporting				rting	
(City)	(S	tate)	(Zip)											Perso	•				
		Tal	ole I - N	on-Der	ivativ	e Se	curi	ties A	cquire	d, Di	sposed o	f, or Be	neficiall	y Owned					
1. Title of S	Security (Ins	tr. 3)		2. Transa	action					3. 4. Securities Acquired (A) o				5. Amo				7. Nature of	
				Date (Month/D	Day/Yea			,	Code (Instr.		Disposed Of	(D) (Instr.	3, 4 and 5)	Securiti Benefic	ally (D)		m: Direct or Indirect	Indirect Beneficial	
						(Mo	Month/Day/Year)) 8)						Owned Following Reported			Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3					
Common Stock 06/05/					/2020	020			М		19,476	A	\$13.86	266,967		\vdash	D		
Common Stock 00/03/20				72020			IVI		13,470	A			3,307	·					
Common Stock 06/05/20				/2020	020		S		19,476	D	\$42.714	(1) 24	7,491		D				
			Table II								posed of,			Owned					
				(e.g.,	puts,	call	s, w	arrant	s, opti	ons,	convertib	le secu	ırıtıes)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date Execution (Month/Day/Year) 3A. Deel Execution if any (Month/II		n Date,	4. Transa Code (8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares						
Option to Buy	\$13.86	06/05/2020			М			19,476	04/01/2	016 ⁽²⁾	03/20/2023	Common Stock	19,476	\$0	0		D		

Explanation of Responses:

- 1. Represents the average price of shares sold; full information regarding the number of shares sold and specific prices will be made available upon request to the Company's Office of the General Counsel.
- 2. Stock options were granted on 03/20/2013, vested equally over a three-year period, and were fully vested on 04/01/2016.

/s/ Laura F. Howell, by power of attorney

06/08/2020

** 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.