#### COMFORT SYSTEMS USA INC

Form 4

August 01, 2016

### FORM 4

Check this box

if no longer

subject to

Section 16.

Form 4 or

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Last)

Common

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person \* Krusi Alan

2. Issuer Name and Ticker or Trading Symbol

COMFORT SYSTEMS USA INC

[FIX] 3. Date of Earliest Transaction

(Month/Day/Year) 08/01/2016

X\_ Director Officer (give title

Issuer

10% Owner Other (specify

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

C/O COMFORT SYSTEMS USA. INC., 675 BERING DRIVE, SUITE 400

(First)

(Middle)

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

5. Relationship of Reporting Person(s) to

(Check all applicable)

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

HOUSTON, TX 77057

(City) (State) (Zip)

08/01/2016

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

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of 6. Ownership 7. Nature of Form: Direct Indirect Securities Beneficially (D) or Beneficial Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported

I

(A) Transaction(s) (Instr. 3 and 4) Code V Amount (D) Price

\$ 3,000

S (1) D 30.13 54,393 (2)

By trust  $\frac{(3)}{}$ 

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	le and	8. Price of	9. Nı
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	ate Amo		ınt of	Derivative	Deri
	Security	or Exercise		any	Code	of	(Month/Day/	/Year)	Under	rlying	Security	Secu
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Secur	ities	(Instr. 5)	Bene
		Derivative				Securities			(Instr. 3 and 4)		Own	
		Security				Acquired						Follo
		-				(A) or						Repo
						Disposed						Tran
						of (D)						(Inst
						(Instr. 3,						
						4, and 5)						
										Amount		
							Date Exercisable	Expiration Date	or Title Nu	Number		
					Code V	(A) (D)				Shares		
					Code v	(A) (D)				Shares		

### **Reporting Owners**

Relationships Reporting Owner Name / Address Director 10% Owner Officer Other

Krusi Alan C/O COMFORT SYSTEMS USA, INC. 675 BERING DRIVE, SUITE 400 HOUSTON, TX 77057



## **Signatures**

/s/ Trent T. McKenna, by power of attorney

08/01/2016

\*\*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).
- This transaction was effected pursuant to a Rule 10b5-1 plan adopted by the Reporting Person in accordance with Rule 10b5-1 of the **(1)** Securities Exchange Act of 1934, as amended.
- 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.
- (3) Held by The Krusi Family Trust for which the Reporting Person and his spouse are trustees.

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.

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