Instruction 1(b).

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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*  Howell Laura Finley						2. Issuer Name and Ticker or Trading Symbol COMFORT SYSTEMS USA INC [ FIX ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director						
(Last) (First) (Middle) C/O COMFORT SYSTEMS USA, INC.						3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024								X below) below) SVP & GENERAL COUNSEL						
675 BERING DRIVE, SUITE 400						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	ON TY	7	7057			X Form filed by One Reporting Persor Form filed by More than One Repor Person														
(City)	(St	ate) (Z	Zip)		Ru	Rule 10b5-1(c) Transaction Indication														
				Check to satisfy to	his box he affirr	to inc	licate the defens	at a tra e cond	nsaction was n itions of Rule 1	nade pur  0b5-1(c)	suant to a . See Instr	contrac	ct, instru 10.	uction or writt	en plan	that is inter	nded to			
		Table	I - N	on-Deriva	tive	Secui	rities	Ac	quire	d, Di	sposed o	f, or B	enefici	ially	Own	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y						Execution D		on Date,				Acquired (A) or (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Followin Reported		ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Transa		ed ction(s) 3 and 4)			(Instr. 4)	
Common	24(1)	<b>1</b> <sup>(1)</sup>					210(2)	D	\$320.0	3(3)	3 <sup>(3)</sup> 8,272		D							
Common Stock 04/01/202-						4(1)					214(4)	D	\$320.0	0.03(3)		8,058		D		
Common Stock 04/01/202-						.4(1)					210(5)	D	\$320.0	7,848		,848	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)	titve Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y D	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code		v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares							

## **Explanation of Responses:**

- 1. Forfeited shares are related to restricted stock units that vested on April 1, 2024 and were priced based on the average of the high and low stock price on April 1, 2024.
- 2. Reflects forfeited shares related to the first vesting of restricted stock units granted on March 21, 2023.
- 3. Price is based on the average of the high and low stock price on April 1, 2024.
- 4. Reflects forfeited shares related to the second vesting of restricted stock units granted on March 23, 2022.
- 5. Reflects forfeited shares related to the third and final vesting of restricted stock units granted on March 10, 2021.

/s/ Rachel R. Eslicker, Attorney-in-Fact

04/03/2024

\*\* 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.