

OMB APPROVAL	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>Mylett James Matthew</u> _____ (Last) (First) (Middle) <u>675 BERING DRIVE, SUITE 400</u> _____ (Street) <u>HOUSTON TX 77057</u> _____ (City) (State) (Zip)			2. Issuer Name and Ticker or Trading Symbol <u>COMFORT SYSTEMS USA INC [FIX]</u>			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>SrVP - Service</u>		
3. Date of Earliest Transaction (Month/Day/Year) <u>03/25/2015</u>			4. If Amendment, Date of Original Filed (Month/Day/Year)			6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> 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)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	03/25/2015		A		4,728 ⁽¹⁾	A	\$0	10,301	D	
Common Stock	04/02/2015 ⁽²⁾		F		491 ⁽³⁾	D	\$21.04 ⁽⁴⁾	9,810	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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		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	(A)	(D)	Date Exercisable	Expiration Date					
Employee Stock Option	\$19.67	03/25/2015		A		12,205		04/01/2016 ⁽⁵⁾	03/25/2025 ⁽⁶⁾	Common Stock	\$0	12,205	D	

Explanation of Responses:

- Each restricted stock unit granted on March 25, 2015 represents a right to receive one share of common stock and will vest in equal installments over a three-year vesting schedule.
- Forfeited shares are related to restricted stock units that vested on April 1, 2015 and were priced based on the average of the high and low stock price on April 1, 2015. Forfeitures were processed on April 2, 2015.
- Reflects forfeited shares related to the first vesting of restricted stock units granted on March 19, 2014.
- Price is based on the average of the high and low stock price on April 1, 2015.
- Stock options vest in equal installments over a three-year vesting schedule.
- Stock options will expire at the earlier of ten years from the date of grant or three months following termination of employment.

/s/ Trent T. McKenna, by power of attorney 04/02/2015

** 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.