| SEC Form 4 | |
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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

| STATEM | ENT OF CHANGES IN BENEFICIAL OWNERSHIP | |
|--------|--|--|
| F | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 | |

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| | ions may conti tion 1(b). | nue. See | d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | 34 | | | hours | per res | sponse: | | 0.5 | | |
|---|---|--|--|---------|---|-------|---|------|----------|--------------------------------------|------|-----------|-------|-----------------------|------------------------------|--|--|--|---------------|--|--|---|
| 1. Name and Address of Reporting Person [*] Makode Gail D | | | | | | | 2. Issuer Name and Ticker or Trading Symbol Integrated Electrical Services, Inc. [IESC] | | | | | | | | | | pplica ector | ble) | ig Per | son(s) to Iss 10% Ov | vner | |
| (Last) (First) (Middle) ONE SOUND SHORE DR, SUITE 304 | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/14/2015 | | | | | | | | | | Officer (give title below) SVP, GC & | | | Other (speci below) & Secretary | | |
| (Street) GREENWICH CT 06830 (City) (State) (Zip) | | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | e |
| | | Tab | le I - Nor | n-Deriv | ative | Se | curitie | s Ac | cqu | uired, D | oisp | osed c | of, o | r Ben | eficial | ly Owi | ned | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D: | | | | | | ar) i | A. Deemed execution Date any Month/Day/Yea | | Code (In | | | | | Acquired D) (Instr | l (A) or : 3, 4 and | I Secu Ben Own | 5. Amount of Securities Beneficially Owned Followir Reported | | Form (D) o | n: Direct r Indirect Istr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | | Code \ | / | Amount | | (A) or (D) Pric | | Tran | Transaction(s) (Instr. 3 and 4) | | | | | |
| | | Т | able II - | | | | | | | red, Dis options | | | | | | v Owne | ed | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | 4. Transaction Code (Instr. 8) | | | | Ex | Date Exer piration D onth/Day/ | ate | | | | | 8. Price Derivati Securiti (Instr. 5 | ive d y S) E F F T | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | ly I (| 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Da | te ercisable | | cpiration | Title | | or Number of Shares | | | | | | | |

01/14/2017

buy)

\$7.27

Explanation of Responses:

Employee Stock Option

(right to

/s/Gail D. Makode

** Signature of Reporting Person

5,000

\$<mark>0</mark>

Common

Stock

01/14/2025

01/16/2015

Date

5,000

D

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).

01/14/2015

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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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.

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