Butts Robert W Form 4 September 07, 2007

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

OMB 3235-0287 Number:

January 31, Expires: 2005

Estimated average burden hours per

response... 0.5

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

Butts Robert W

(Last)

(City)

2. Issuer Name and Ticker or Trading

Symbol

INTEGRATED ELECTRICAL **SERVICES INC [IESC]**

Issuer

(Check all applicable)

X 10% Owner Other (specify

5. Relationship of Reporting Person(s) to

(First) (Middle)

(Street)

(State)

(Month/Day/Year) 1800 WEST LOOP SOUTH, SUITE 09/06/2007

(Zip)

500

4. If Amendment, Date Original

3. Date of Earliest Transaction

Filed(Month/Day/Year)

Officer (give title

6. Individual or Joint/Group Filing(Check Applicable Line)

X_ Director

Form filed by One Reporting Person _X_ Form filed by More than One Reporting

Person

HOUSTON, TX 77027

(- 3)	()	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	oie i - Non	-Derivative Se	curities	s Acqu	iirea, Disposea c	or, or Benefic	ially Owned
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities	Acquire	ed (A)	5. Amount of	6.	7. Nature of
Security	(Month/Day/Year)	Execution Date, if	Transaction	omr Disposed o	of (D)		Securities	Ownership	Indirect
(Instr. 3)		any	Code	(Instr. 3, 4 an	d 5)		Beneficially	Form:	Beneficial
		(Month/Day/Year)	(Instr. 8)				Owned	Direct (D)	Ownership
							Following	or Indirect	(Instr. 4)
					(4)		Reported	(I)	
					(A)		Transaction(s)	(Instr. 4)	
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
			Couc v	Milount	(D)	TITCC			See
Common			~		_				
Stock	09/06/2007		S	1,900,102	D	\$ 22	0	I	Attachment
Stock									A

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 required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(9-02)

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9. Nu Deriv Secur Bene Own

Follo Repo Trans

(Insti

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. Transac Code (Instr. 8	5. tionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	S	ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)
				Code V	/ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Butts Robert W 1800 WEST LOOP SOUTH, SUITE 500 HOUSTON, TX 77027	X	X						
Southpoint Capital Advisors LP 623 FIFTH AVENUE, SUITE 2601 NEW YORK, NY 10022				Reporting Person				
Southpoint GP, LP 623 FIFTH AVENUE, SUITE 2601 NEW YORK, NY 10022				Reporting Person				
Southpoint Capital Advisors LLC 623 FIFTH AVENUE, SUITE 2601 NEW YORK, NY 10022				Reporting Person				
Southpoint GP, LLC 623 FIFTH AVENUE, SUITE 2601 NEW YORK, NY 10022				Reporting Person				
Clark John Smith II 623 FIFTH AVENUE, SUITE 2601 NEW YORK, NY 10022				Reporting Person				

Signatures

Curt L. Warnock Attorney-in-Fact	09/07/2007
**Signature of Reporting Person	Date

Reporting Owners 2

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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).

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.