## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*  Makode Gail D						2. Issuer Name and Ticker or Trading Symbol IES Holdings, Inc. [ IESC ]										all applicable) Director		ng Person(s) to Issue		Owner	
(Last) (First) (Middle) ONE SOUND SHORE DR, SUITE 304						3. Date of Earliest Transaction (Month/Day/Year) 12/07/2018										Officer (give title below)  SVP, GC & Secretary			Other (specify below) retary		
(Street) GREENV (City)	GREENWICH CT 06830						4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indivi ine) X	lividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  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. Transac Date (Month/Da						Execution Date,		Date,	Transaction Code (Instr. 5		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				nd	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
											v	Amount	(	A) or D)	Price	.	Transaction(s) (Instr. 3 and 4)				(11150.4)
Common Stock <sup>(1)</sup> 12/07/					/2018	2018		A		32,015	5	Α	\$0		64,656		D				
Common Stock <sup>(2)</sup> 12/07/					//2018	2018		F		14,848		D	\$17	.09	49,808		D				
			Та									sed of, onvertib					ned				
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			4. Transac Code (In 8)	saction de (Instr. 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date E Expiratio (Month/D	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Pri Deriv Secu (Instr	ative rity	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Own Form Direc or In (I) (Ir	ership 1: ct (D) direct sstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

## **Explanation of Responses:**

1. On October 2, 2015, Ms. Makode was granted an award of 60,000 Performance Units, pursuant to the IES Holdings, Inc. 2006 Equity Incentive Plan, as amended and restated (the "2006 Equity Incentive Plan"). Each Performance Unit represented a contractual right in respect of one share of the Issuer's common stock. The Performance Units were to become vested, if at all, upon the achievement of certain specified financial performance objectives and the continued performance of services through the date that the Company filed its Annual Report on Form 10-K for its fiscal year ended September 30, 2018 (the "Annual Report"). On December 7, 2018, upon the filing of the Annual Report, the performance criteria were determined to have been partially met, resulting in vesting of 32,015 Performance Units under this

2. Represents shares withheld to satisfy withholding tax liability resulting from the vesting of Performance Units delivered pursuant to the 2006 Equity Incentive Plan.

/s/Gail D. Makode 12/11/2018

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.