MYR GROUP INC.

Form 5

February 12, 2015

Reported

Form 4 Transactions

Stock

#### **OMB APPROVAL** FORM 5 **OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per OWNERSHIP OF SECURITIES 5 obligations response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

Reported											
1. Name and Address of Reporting Person * Patterson William			2. Issuer Name <b>and</b> Ticker or Trading Symbol MYR GROUP INC. [MYRG]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (M	(Mont	ement for Issuer's h/Day/Year) /2014	Fiscal Year Ended			(Check all applicable)  Director 10% Owner Officer (give title Other (specify				
60 ARDMO	RE ROAD		12/51/2011				below)	below)			
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Reporting				
Filed(Month/Day/Y							(check applicable line)				
HO-HO-KUS, NJ 07423  _X_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person											
(City)	(City) (State) (Zip) 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, any (Month/Day/Yea	Code	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		)	5. Amount of Securities Beneficially Owned at end of Issuer's	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Amount	(A) or (D)	Price	Fiscal Year (Instr. 3 and 4)				
Common Stock	Â	Â	Â	Â	Â	Â	12,070	D	Â		
Common Stock	01/09/2014	Â	W	318	A	\$0	318	I	As co-trustee of Laurie Keeley CRUT		
Common	07/07/2014	Â	W	68	A	\$0	386	I	As		

co-trustee of Laurie

Keeley CRUT

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

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 control number.

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# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	int of	Derivative	
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	
	Derivative				Securities			(Instr.	3 and 4)		
	Security				Acquired						
					(A) or						
					Disposed						
					of (D)						
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	TC:41	or		
						Exercisable	Date	Title Number			
					(4) (5)				of		
					(A) (D)				Shares		

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
· · · · · · · · · · · · · · · · · · ·	Director	10% Owner	Officer	Other			
Patterson William 60 ARDMORE ROAD	Â	Â	Â	â			
HO-HO-KUS, NJ 07423	А	А	A	A			

## **Signatures**

/s/ Gerald B. Engen, Jr. as Attorney-in-Fact for William D. Patterson

02/12/2015

\*\*Signature of Reporting Person

Date

# **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 provided 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.

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