Lenocker W Tracy Form 4 December 02, 2011

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

2. Issuer Name and Ticker or Trading

Willdan Group, Inc. [WLDN]

3. Date of Earliest Transaction

4 If Amendment Date Original

(Month/Day/Year)

11/30/2011

OMB Number:

5. Relationship of Reporting Person(s) to

6 Individual or Joint/Group Filing(Check

(Check all applicable)

Issuer

below)

_X__ Director

Officer (give title

3235-0287 January 31, Expires:

OMB APPROVAL

2005

10% Owner

_ Other (specify

Estimated average burden hours per response... 0.5

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

SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

Symbol

1(b).

(Print or Type Responses)

Lenocker W Tracy

2401 EAST KATELLA

AVE, SUITE 300

(Last)

1. Name and Address of Reporting Person *

(First)

(Street)

(Middle)

		(Street)	4. If Amendment, Date Original					6. Individual of Joint/Group Filing(Check				
Filed(Month/Day/Year) ANAHEIM, CA 92806						Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
	(City) (State) (Zip)			e I - Non-D	erivative	Secur	ities Acq	quired, 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. Transactio Code (Instr. 8)	4. Securi on(A) or D (D) (Instr. 3,	4 and (A) or	d of	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)		
	Common Stock	11/30/2011		S	8,000	D	\$ 4	136,000	I	By The 1996 Tracy and Joanne Lenocker Family Trust		
	Common Stock	12/01/2011		S	215	D	\$ 4.01	135,785	I	By The 1996 Tracy and Joanne Lenocker Family Trust		

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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.

SEC 1474 (9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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	9
Derivativ	e Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Da	ate	Amou	nt of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired						J
					(A) or						J
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration	Titla			
						Exercisable Date	Date	Title			
				Code V	(A) (D)						
				Code V	(A) (D)	Exercisable	*	Title	Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships
Reporting Owner Name / Address	

Director 10% Owner Officer Other

Lenocker W Tracy 2401 EAST KATELLA AVE SUITE 300 ANAHEIM, CA 92806

X

Signatures

/s/ Kimberly D. Gant, Attorney-in-fact for W. Tracy
Lenocker 12/02/2011

**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 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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