FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

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

Name and Address of Reporting Person*     Johnson Betty R.					2. Issuer Name and Ticker or Trading Symbol  MYR GROUP INC. [ MYRG ]									neck all ap	ionship of Reporting all applicable) Director		Person(s) to Issuer 10% Owner	
`	, ,	3. Date of Earliest Transaction (Month/Day/Year) 05/01/2014											Officer (give title below)		Other (specify below)			
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)									. Individual or Joint/Group Filing (Check Applicatine)  X Form filed by One Reporting Person				
ORN II	. 6	0047														re thai	n One Rep	oorting
(S	tate) (Z	Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date				y/Year)	Execution Date,			Transaction Disposed Of (D) (Instr. Code (Instr. and 5)					Secur Benef Owne	ities ficially d	Forn (D) o Indir	n: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v				Price	Repo Trans	Reported Transaction(s) (Instr. 3 and 4)		4)	(111341. 4)
Common Stock 05/01/2					2014			Α		2,552(1)		A	\$0	) 1	0,630		D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
		Executi if any	ion Date,			Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration			Amou or Numb of		unt	of Derivative Security	derivative Securities Beneficially Owned Following Reported	, O F O (I 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	ORN IL  (S  Security (Ins  Stock	(First) (First	(First) (Middle) E VIEW ROAD  ORN IL 60047  (State) (Zip)  Table I - N  Security (Instr. 3)  Stock  Table II  2. Table II  2. Conversion or Exercise Price of Derivative (Month/Day/Year) (Month Derivative (Mo	(First) (Middle)  E VIEW ROAD  ORN IL 60047  (State) (Zip)  Table I - Non-Deriv  Security (Instr. 3)  2. Transac Date (Month/Dat)  Stock  Table II - Derivati (e.g., pt  Conversion or Exercise Price of Derivative (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  Should be price of Execution Date, if any (Month/Day/Year)	Stock	(First) (Middle)  E VIEW ROAD  Table I - Non-Derivative Security (Instr. 3)  Stock  Table II - Derivative Security (Month/Day/Year)  Table II - Derivative Security (e.g., puts, calls, volume or Exercise Price of Derivative Security (Month/Day/Year)  Security  A. If Amend 2. Table II - Derivative Security (e.g., puts, calls, volume or Exercise Price of Derivative Security (Month/Day/Year)  Security  A. 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## Explanation of Responses:

1. Shares of restricted stock awarded pursuant the Issuer's 2007 Long-Term Incentive Plan (Amended and Restated as of May 1, 2014). These shares will vest ratably over three years beginning May 1, 2015.

## Remarks:

/s/ Gerald B. Engen, Jr. as Attomey-in-Fact for Betty R. 05/02/2014 Johnson

\*\* 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.