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

| 1. Name ar | MY | 2. Issuer Name and Ticker or Trading Symbol MYR GROUP INC. [MYRG] | | | | | | | | | heck all | ship of Reporti applicable) irector | ng Per | son(s) to | | | | | |
|--|---|--|--------------|---|------|---|---------------------------|----------------------------------|--|-----|---|---|---|---|---|------------------------------------|---|--|----------|
| (Last) | (Fir | st) (N | /liddle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/21/2013 | | | | | | | | | | fficer (give title elow) | | | (specify |
| MYR GR | | | | | | | | | | | Chairman, President and CEO | | | | | | | | |
| 1701 GO | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | | |
| (Street) | | | | | | | | | | | | | | | X Form filed by One Reporting Person | | | | |
| ROLLING MEADO | - | 6 | -4210 | | | | | | | | | | | | orm filed by Mo erson | re than | One Rep | oorting | |
| (City) | (Sta | ate) (Z | <u>Z</u> ip) | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/ | | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr. 5) | | | | and Se Be Ov | Amount of curities neficially ned llowing | | ect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | Code | v | Amount | (A) or (D) | | Price | Re Tra | ported ansaction(s) str. 3 and 4) | (iiisu | . 4) | (msu. 1) | | | |
| Common | 013 | | | | A | | 11,1550 | (1) | Α | \$0 | | 215,980 | | D | | | | | |
| Common Stock 02/21/20 | | | | | | 013 | | | F | | 3,630(2 | 2) D \$2 | | \$23. | 17 | 212,350 | | D | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | of Deriv Secu Acqu (A) o Disp | r osed) r. 3, 4 | 6. Date E Expiration (Month/I | on Da | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | 8. Price of Derivati Security (Instr. 5 | derivative ve Securities / Beneficially | On For Di or (I) 4) | wnership orm: irect (D) · Indirect (Instr. | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nun of | nber | | | | | |

Explanation of Responses:

- 1. Shares of common stock received upon vesting of performance share awards for performance period from January 1, 2010 through December 31, 2012.
- 2. Represents shares of common stock withheld to satisfy tax withholding obligations in connection with the vesting of performance shares.

/s/ Gerald B. Engen, Jr. as
Attomey-in-Fact for William 02/25/2013

A. Koertner

** Signature of Reporting Person Date

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

- * 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.