# 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 and Address of Reporting Person* <u>COOPER TOD M.</u>						2. Issuer Name and Ticker or Trading Symbol <u>MYR GROUP INC.</u> [MYRG]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) 1701 GC	(Fi DLF ROAD	rst) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 08/18/2016								X	X Officer (give title Other (specify below) below) Senior Vice President			· · ·	
SUITE 3-1012						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) ROLLING IL 60008 MEADOWS				×										X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate) (	Zip)		~														
		Tab	le I -	Non-Deriv	vative	Sec	urit	ties Ad	cquired,	Dis	sposed	of, or I	Benef	icially	Own	ed			
1. Title of Security (Instr. 3) Date (Month/Day/				/Year)	Execution D			3. Transact Code (In 8)	ion Dispos		ities Acq d Of (D) (					6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	(A) or (D) Price		Repo Trans		(Instr. 4)	(Instr. 4)	
Common Stock 08/18/20					016				М		9,21	2 A		\$ <mark>13</mark>	3	34,319	D		
Common Stock 08/18/20				016	16		S		9,21	2 D \$28		28.75(1)	2	25,107	D				
		Та	able I	I - Deriva (e.g., p					uired, D , option						wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transactiou Code (Instr 8)		n Number		6. Date Ex Expiration (Month/Da	Dat	e Amount o		of of s Dem ng Sec e (Ins		rice ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amo or Num of Shar	ber					
Non- Qualified Stock Option	\$13	08/18/2016			М			9,212	12/20/2003	8 1	2/20/2017	Commor Stock	9,2	12	<b>\$</b> 0	0	D		

### Explanation of Responses:

1. The price recorded in column 4 represents a weighted average price per share of 9,212 shares of common stock sold in 3 transactions, ranging in price from \$28.75 to \$28.78 per share. For all transactions reported in this Form 4 utilizing a weighted average price for snace of common stork sold in 5 utilizations, tanging in price non 526.79 to 526.79 per snace for an utilizations reported in this Form 4 utilizing a weighted average price, the reporting person undertakes to provide, upon request by the staff of the Securities and Exchange Commission, the Issuer, or a security holder of the Issuer, full information regarding the number of shares sold at each separate price within the range.

#### Remarks:

/s/ GERALD B. ENGEN, JR. as	
Attorney-in-Fact for Tod M.	08/22/2016

Attorney-in-Fact for Tod M.

Cooper

\*\* 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.