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 a | hip of Reporti oplicable) ector | | Person(s) to Issuer 10% Owner | | |
|--|--|--|-----------------|---|--------------------------------|--|--|----------------------------------|---|---|--------------------|--|---|---|--|---|--|----------------------------------|---|--|
| (Last) | (Fir | , | | 3. Date of Earliest Transaction (Month/Day/Year) 03/24/2011 | | | | | | | | | | Officer (give title below) | | Other (below) | | | | |
| 20 LAKE VIEW ROAD | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) HAWTH | ORN IL | 6 | 60047 | | | | | | | | | | | | Fo | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (St | ate) (Z | Zip) | | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | | | | //Year) | Execution Date, | | | Transaction Dispose Code (Instr. and 5) | | | ities Acquired (A) or d Of (D) (Instr. 3, 4 | | | r 5. Amount of Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A (D |) or) | Price | Rep Tran | orted saction(s) r. 3 and 4) | (111301.4) | | (mau. 1) | |
| Common Stock 03/24/2 | | | | | | 011 | | | | | 59(1) | | D | \$24. | 18 | 1,523 | | | | |
| Common Stock 03/24/20 | | | | | | 011 | | | A | | 2,481 | 2) | A | \$0 | | 4,004 | | | | |
| | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execu if any | eemed tion Date, h/Day/Year) | 4. Transac Code (I 8) | | of Derive Secur Acque (A) of Dispersion | ired r osed) . 3, 4 | 6. Date E Expiration (Month/I | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | str. | 8. Price of Derivativ Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4) | Owners Form: Direct or Indi (I) (Inst | hip D) rect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code V | | (A) (D) | | Date Exercisable | | Expiration Date | Title Sha | | res | | | | | | |

Explanation of Responses:

- 1. These shares were withheld to cover taxes associaated with the vesting of restricted stock issued under the MYR Group Inc. 2007 Long-Term Incentive Plan.
- 2. Shares of restricted stock granted pursuant to the MYR Group Inc. 2007 Long-Term Incentive Plan. These shares will vest ratably over three years beginning March 24, 2012.

/s/ Gerald B. Engen, Jr., as Attorney-in-Fact for Betty R. 03/25/2011 Johnson

** 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.