Edgar Filing: Willbros Group, Inc.\NEW\ - Form 4

Willbros Gro Form 4 June 06, 201	oup, Inc.\NEW\ 6										
							OMB APPROVAL				
Check this box						OMB Number:	3235-0287				
								Expires:	January 31, 2005		
subject to Section 1	5. SECURITIES							Estimated a burden hou	average Irs per		
Form 4 or Form 5 Eiled purcuant to Section 16(a) of the Securities Exchange Act of 1034								response	0.5		
Form 5 obligations may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
1(b).											
(Print or Type Responses)											
× 51	1										
1. Name and Address of Reporting Person *2. Issuer NameWILLIAMS S MILLERSymbol				Ticker or 7	Fradin	g	5. Relationship of Reporting Person(s) to Issuer				
		Willbros	s Group, I	Inc.\NEW	/\ [W	'G]	(Check all applicable)				
(Last)	Last) (First) (Middle) 3. Date of Earliest Transaction					(Chev	ek all appliedor	()			
		(Month/Day/Year)				X_ Director 10% Owner Officer (give title Other (specify					
4400 POST OAK 06/02/20 PARKWAY, SUITE 1000							below)	er (specify			
FAKKWAI	(Street)	4 70 4	1 . 5				< T 11 · 1 · 1 · T				
		Amendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(Check					
		Theu(Mon	ui/Day/Teal)	,			Applicable Line) _X_ Form filed by One Reporting Person				
HOUSTON	, TX 77027						Form filed by M Person	More than One R	eporting		
(City)	(State) (Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f. or Beneficia	llv Owned		
1.Title of	2. Transaction Date 2A.		3.	4. Securi			5. Amount of	6. Ownership	-		
				onAcquired			Securities	Form: Direct	Indirect		
(Instr. 3)	any (Mc	nth/Dav/Year)	CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					D) or Indirect (I)	Beneficial Ownership		
	(1110	litil Duy, Iour)					Following	(Instr. 4)	(Instr. 4)		
					(A)		Reported Transaction(s)				
					or	р.	(Instr. 3 and 4)				
Common				Amount	(D)	Price					
Stock	06/02/2016		А	7,891	А	\$0	109,617	D			

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.

 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		4.	5.	6. Date Exer	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Date		Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Underl	ying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities	5		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	, i i i i i i i i i i i i i i i i i i i				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(mon
					4, and 5)						
					+, and <i>5</i>)						
									Amount		
						D /			or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
					() (2)						

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Reporting Owners

Reporting Owner Name / Address Director 10% Owner Officer Other WILLIAMS S MILLER 4400 POST OAK PARKWAY Х **SUITE 1000** HOUSTON, TX 77027 Signatures Lori Pinder, Attorney-in-Fact for S. Miller Williams 06/06/2016 **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).

Relationships

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.