Edgar Filing: Sparks Scott Andrew - Form 4

Sparks Scott	Andrew											
Form 4												
January 05, 2	018											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB Number:	3235-0287			
Check this box Washington, D.C. 20549									January 31,			
if no longer STATEMENT OF CHANGES IN RENEFICIAL OWNERSHIP OF							Expires:	2005				
subject to Section 16				SECUR					Estimated average burden hours per response 0.5			
Form 4 or				~~~~~								
Form 5	Filed purs	uant to S	Section 16	b(a) of the	e Securiti	ies Ez	xchang	ge Act of 1934,				
obligation may conti				•	•			of 1935 or Section	on			
See Instru		30(h)	of the Inv	vestment	Compan	y Act	of 19	40				
1(b).												
(Print or Type R	esponses)											
(I fine of Type R	csponses)											
1. Name and Ad	ddress of Reporting P	erson [*]	2. Issuer	Name and	Ticker or '	Tradin	g	5. Relationship of	Reporting Person(s) to			
Sparks Scott Andrew Symbol							0	Issuer				
HELIX ENERGY SOLUT					ΓΙΟΝ	S						
GROU				OUP INC [HLX]				(Check all applicable)				
(Last)	(First) (M	iddle)	3. Date of Earliest Transaction Director					10% Owner				
				onth/Day/Year)				X Officer (give title Other (specify below) below)				
	M HOUSTON		01/04/20)18				,	VP and COO			
PARKWAY	N. STE. 400											
(Street) 4. If An				Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mo				th/Day/Year))			Applicable Line) _X_ Form filed by One Reporting Person				
HOUSTON,	TX 77043								More than One Re			
11005101,	1A //043							Person				
(City)	(State) (A	Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficial	lly Owned		
1.Title of	2. Transaction Date	2A. Dee	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Executio	tion Date, if TransactionAcquired (A) or					Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month/	Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				(D) or Indirect (I)	Beneficial Ownership (Instr. 4)			
		(Monul/	Day/Teal)				Following	(Instr. 4)				
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
C				Code V	Amount	(D)	Price	(msu. 5 and 4)				
Common	01/04/2018			F	9,282	D	\$8	206,109	D			
Stock					(1)							

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 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. Transactio Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	(Month/Day/Year) ative tites red sed		7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships					
I G G G G G G G G G G G G G G G G G G G	Director	10% Owner	Officer	Other			
Sparks Scott Andrew 3505 W SAM HOUSTON PARKWAY N. STE. HOUSTON, TX 77043	400		EVP and COO				
Signatures							
/s/ Alisa B. Johnson by power of attorney	01/05/2018						

**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).

(1) These shares were forfeited to satisfy tax obligations related to the vesting of the reporting person's restricted stock award.

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.