Edgar Filing: Richards James D. - Form 4

Dishanda Ismas D

Form 4	nes D.									
September 0	1, 2017									
FORM	14 UNITED S	TATES SECI	URITIES A	ND EX(THAT	NGE (COMMISSION	OMB APPROVAL		
			Vashington,					OMB Number:	3235-0287	
Check the if no long	ter.)X							January 31 2005	
subject to Section 1 Form 4 o Form 5	6. r		SECUR	RITIES			NERSHIP OF ge Act of 1934,	Estimated a burden hou response	average Irs per	
obligation may cont <i>See</i> Instru 1(b).	ns Section 17(a		Utility Hold	ding Con	ipany	Act o	f 1935 or Sectio	n		
(Print or Type I	Responses)									
1. Name and Address of Reporting Person <u>*</u> Richards James D.			2. Issuer Name and Ticker or Trading Symbol GRANITE CONSTRUCTION INC				5. Relationship of Reporting Person(s) to Issuer			
			[GVA]				(Check all applicable)			
(Last) (First) (Middle) 585 WEST BEACH STREET			3. Date of Earliest Transaction (Month/Day/Year) 09/01/2017				Director 10% Owner X Officer (give title Other (specify below) below) Senior Vice President			
			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
WATSONV	VILLE, CA 95076						Form filed by M Person	Aore than One Re	eporting	
(City)	(State) (2	Zip) T	able I - Non-E	Derivative	Securi	ities Aco	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Yes	n Date, if Transaction(A) or Disposed Code (D)			d of	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
2			Code V	Amount	(A) or (D)	Price \$	Transaction(s) (Instr. 3 and 4)			
Common Stock	09/01/2017		S	4,000	D	55.5 (<u>1</u>)	25,521.89 <u>(2)</u>	D		
Common Stock							6,147.34 <u>(3)</u>	Ι	by ESOP	

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.

Edgar Filing: Richards James D. - Form 4

 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)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Richards James D. 585 WEST BEACH STREET WATSONVILLE, CA 95076			Senior Vice President				
Signatures							
Richard A. Watts, attorney-in-fact Richards	Э.	09/01/2017					
**Signature of Reporting Pe	erson		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).

The number of securities reported represents an aggregate number of shares sold in multiple open market transactions over a range of
 (1) sales prices. The price reported represents the weighted average price. The Reporting Person undertakes to provide the staff of the SEC, the Issuer, or a stockholder of the Issuer, upon request, the number of shares sold at each separate price within the range.

- (2) Total adjusted to include dividend equivalents (DEUs: 14 4/14/17; 15 7/15/17) credited to the Reporting Person under the dividend reinvestment feature of the Granite Construction Incorporated 2012 Equity Incentive Plan since the Reporting Person's last report.
- (3) Adjusted to reflect dividends earned under the dividend reinvestment feature of the ESOP Plan since the Reporting Person's last report.

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.