Wagner Geoffrey C. Form 3 January 04, 2018 **FORM 3** UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

OMB APPROVAL

OMB Number: 3235-0104 Expires: January 31, 2005 Estimated average burden hours per response... 0.5

(Print or Type Responses)

| 1. Name and Address of Reporting Person <u>*</u> Wagner Geoffrey C. | | | 2. Date of Event Requiring Statement (Month/Day/Year) | 3. Issuer Name and Ticker or Trading Symbol HELIX ENERGY SOLUTIONS GROUP INC [HLX] | | | | |
|---|-------------------|---------------------------|---|---|--|---------------------------|--|--|
| (Last) (F | Pirst) | (Middle) | 01/02/2018 | 4. Relationship of Reporting Person(s) to Issuer | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | |
| 3775 INGOLD (s HOUSTON, 1 | treet) | 005 | | Director X Officer (give title below | all applicable) <u>10% (</u> Other (specify belo and CCO | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One | |
| (City) (S | tate) | (Zip) | Table I - N | lon-Derivat | ive Securiti | es Be | Reporting Person neficially Owned | |
| 1.Title of Security (Instr. 4) | | | 2. Amount of Beneficially (Instr. 4) | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nat Owne (Instr. | • | |
| Common Stock | | | 0 | | D | Â | | |
| Reminder: Report o owned directly or in | | te line for ea | ch class of securities benefici | ially S | EC 1473 (7-02 |) | | |
| | inform require | ation conta d to respo | oond to the collection of ained in this form are not nd unless the form displ MB control number. | | | | | |
| Table | e II - Deri | vative Secu | rities Beneficially Owned (e. | .g., puts, calls, | warrants, opt | ions, c | onvertible securities) | |

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | | 4. Conversion or Exercise Price of | 5. Ownership Form of Derivative | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|--|--------------------|--|------------------------|---|--|---|
| | Date Exercisable | Expiration Date | Title | Amount or Number of | Security Direct (| Security: Direct (D) or Indirect | |

Shares

(I) (Instr. 5)

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|-----------|-------------|-------|--|--|
| 1 0 | Director | 10% Owner | Officer | Other | | |
| Wagner Geoffrey C. 3775 INGOLD ST HOUSTON, TX 77005 | Â | Â | EVP and CCO | Â | | |
| Signatures | | | | | | |
| /s/ Alisa B Johnson by power o attorney | f 01/04/2018 | | | | | |
| <u>**</u> Signature of Reporting Person | | Da | ate | | | |
| | | | | | | |

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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. 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.