FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations may continue. See

Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 205	49
----------------------	----

Vashington,	D.C.	20549
-------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* KRATZ OWEN E					2. Issuer Name and Ticker or Trading Symbol HELIX ENERGY SOLUTIONS GROUP INC [HLX]								ck all applica Director	ble)		Owner
(Last)	(Fir	st)	(Middle)									<u> </u>	Officer (g	give title	Othe belov	r (specify v)
3505 W SAM HOUSTON PARKWAY N. SUITE 400					3. Date of Earliest Transaction (Month/Day/Year) 01/02/2015							P	RESIDEN	T & CEO		
(Street)	N TX		77043		4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	dividual or Joint/Group Filing (Check Applicable) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta	ate) ((Zip)										FORM IIIE	ей бу моге	ınan One Rep	orung Person
		Та	ble I - Nor	n-Deriva	tive S	ecurities	Acq	uired,	Dis	posed of	, or Ben	eficially	Owned			
Date			2. Transac Date (Month/Da	saction 2A. Deemed Execution Dat if any (Month/Day/Year)		,	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following		Form: Direct	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price	Reported Transactio (Instr. 3 an	n(s) id 4)		(Instr. 4)	
Common Stock 01/02				01/02/2	2/2015		A		73,733	A	\$0.00(1	6,314,843(2)		D		
			Table II -			curities A lls, warra							wned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	nversion Exercise (Month/Day/Year) ce of rivative	3A. Deemed Execution Da if any (Month/Day/\)	Cod	nsaction e (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title an of Securit Underlyin Derivative (Instr. 3 an	ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	Owners Form: Direct (or Indir (I) (Inst	Beneficial Ownership ect (Instr. 4)	
				Cod	ode V (A) (D)		Date Exercis	Date Expi Exercisable Date		Title	Amount or Number of Shares		(Instr. 4)	(-)		
Performance Share Unit	(3)	01/02/2015		A		147,466 ⁽⁴⁾		(3)		(5)	Common Stock	147,466	\$0.00	147,460	6 D	

Explanation of Responses:

- 1. This restricted stock award was granted pursuant to the Company's 2005 Long Term Incentive Plan (as Amended and Restated effective May 9, 2012) and therefore has no purchase or sales price.
- 2. Mr. Kratz also has indirect holdings of 1,000,000 shares owned by Joss Investments Limited Partnership, the general partner of which is an entity that Mr. Kratz controls.
- 3. Each Performance Share Unit ("PSU") represents the contingent right to receive one share of Company common stock. Actual number of shares upon vesting may range from 0% to 200% dependent on the Company's relative shareholder return as compared to its peer group over a three-year period beginning January 1, 2015 and ending December 31, 2017. The Compensation Committee has the option to pay the value in cash at its discretion.
- 4. Amount reported is 200% of the number of PSUs granted and the maximum number that may be earned.
- 5. Upon payment of the PSUs which shall occur no later than March 15, 2018.

Remarks:

/s/ Alisa B. Johnson 01/06/2015

** Signature of Reporting Person

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.