FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours nor resnance	. 05							

	ction 1(b).	iuc. occ		Filed							ies Exchang npany Act o		1934		nours	s per re	sponse:	0.5
Name and Address of Reporting Person* Dorward-King Elaine J				2. Issuer Name and Ticker or Trading Symbol								Check all ap	lationship of Reportir sk all applicable) Director Officer (give title below)		10% O			
(Last) (First) (Middle) C/O GREAT LAKES DREDGE & DOCK CORP. 9811 KATY FREEWAY, SUITE 1200											RP.	\dashv				Other (: below)	specify	
(Street) HOUST(ON TX	X 7	7024 Zip)		4. If A	Amend	ment,	Date o	f Origina	d Filed	d (Month/Da	y/Year)		ine) X For	or Joint/Grou m filed by Or m filed by Mo son	ne Rep	orting Pers	on
		Table	I - Non-De	eriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or Be	enefic	ially Ow	ned			
Da			Date	Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)				es Acquired (A Of (D) (Instr. 3		and Secu Bene Owne	i. Amount of Gecurities Beneficially Dwned Following Reported		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o (D)	r Price	Trans	action(s) a and 4)			(Instr. 4)
Common Stock 03/31/			3/31/2	2021				A		1,715	A	\$0	.00	11,483		D		
		Tal	ole II - Der (e.g								osed of, convertib				ed			
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any		ate,	4. Transaction Code (Instr. 8) Secure Acqu (A) on Disport of (D) (Instr. and 5		vative irities ired r osed) r. 3, 4	6. Date Exerciss Expiration Date (Month/Day/Yea		te	Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Natur of Indirec Beneficia Ownershi (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date		Amount or Number of Shares					

Explanation of Responses:

Remarks:

/s/Katherine M. O'Halloran, by Power of Attorney

04/02/2021

** Signature of Reporting Person Date

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.