FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | OMB APPRO | DVAL |
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| -IIP | OMB Number: | 3235-0287 |
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| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |
| |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>DICKERSON LAWRENCE R</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol Great Lakes Dredge & Dock CORP [GLDD] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (the pittle person of the pittle person) | | | | |
|--|---|--|--|---------|--------------------------|---|----------|-----------------|---|---------|--|--|--|---|---|-------------------------|--|--|--|
| (Last) | (Last) (First) (Middle) C/O GREAT LAKES DREDGE & DOCK CORP., | | | | | | Earliest | Transa | action (Mo | nth/E | ay/Year) | | | Officer (give title below) | | Other (s below) | pecity | | |
| 9811 KATY FREEWAY, SUITE 1200 | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | |
| (Street) HOUST(| ON T | K ' | 77024 | | | | | | | | | | | | iled by Mor | | • | | |
| (City) | (Si | tate) | (Zip) | | Ru | | | ` , | Transa | | | | | | | | | | |
| | | | | | | | | | cate that a tr defense con | | | | | tract, instructi on 10. | on or written | plan tha | at is intended | d to | |
| | | Tab | le I - Nor | n-Deriv | ative | Sec | urities | s Acc | quired, [| Disp | osed o | of, or Be | neficia | ly Owne | d | | | | |
| Date | | | 2. Trans Date (Month/ | | ar) E | 2A. Deemed Execution Date, if any (Month/Day/Year | | Transaction Dis | | Dispose | ecurities Acquired (A) osed Of (D) (Instr. 3, 4 | | Benefic Owned | es ally Following | Form: | Direct Endirect Etr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) o (D) | r Price | Reporte Transac (Instr. 3 | tion(s) | | , | Instr. 4) | |
| Common Stock | | | | | | | | | | | | | 88 | 88,562 | | D | | | |
| | | Т | | | | | | | ired, Di options | | | | | / Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Dat if any (Month/Day/Yo | Date, | ate, Transac Code (II | | | | 6. Date Exercisabl Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4) | i i | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | | Date Exercisable | | kpiration ate | Title | Amount or Number of Shares | | | | | | |
| Deferred Stock | (1) | 09/29/2023 | | | A | | 5,763 | | (1) | | (1) | Common Stock | 5,763 | \$0.00 | 50,234 | 4 | D | | |

Explanation of Responses:

1. Deferred Stock Units ("DSUs") granted September 29, 2023 and deferred pursuant to the Company's Director Deferral Plan. The DSUs will be payable in common stock on a 1-for-1 basis on the date upon which Mr. Dickerson's board service ends.

Remarks:

/s/Vivienne R. Schiffer, by Power of Attorney

10/02/2023

** 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.