Edgar Filing: Primoris Services CORP - Form 4

Primoris Serv	vices CORP										
Form 4	10										
March 30, 2010											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								r	PPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box								January 31,			
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP						NERSHIP OF	Expires:	2005			
subject to Section 16. SECURITIES					ITIES				Estimated average burden hours per		
Form 4 or	r								response	•	
Form 5 obligatior	1						C C	e Act of 1934,			
may conti				•	•	· ·		f 1935 or Sectio	n		
See Instru	iction	30(h) of	the Inv	vestment (Compan	y Act	t of 194	40			
1(b).											
(Print or Type R	Responses)										
1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of							Reporting Per	son(s) to			
MOERBEEK PETER J Symbol Issuer						Issuel					
		Р	rimoris	Services	CORP	PRIN	/ 1]	(Chec	k all applicable	e)	
(Last)	(First) (M			Earliest Tra	ansaction						
	DIS SEDVICES			th/Day/Year)				_X_ Director 10% Owner _X_ Officer (give title Other (specify			
C/O PRIMORIS SERVICES 03/29/20 CORPORATION, 26000				2010				below) below)			
	CENTRE DR.							Ex	ec. VP, CFO		
	(Street)	1	If Amon	idmant Dat	o Original			6 Individual or I	oint/Group Filis	or Chask	
· · · · · · · · · · · · · · · · · · ·				ndment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
r ned(nontil Day, real)						_X_ Form filed by One Reporting Person					
LAKE FOR	EST, CA 92630							Form filed by N Person	Nore than One Re	porting	
(City)	(State) (Zip)	Table	I - Non-De	erivative S	Securi	ities Acc	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	2A. Deeme	d	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution I	Date, if	Transactio		spose	d of	Securities	Form: Direct		
(Instr. 3)		any (Month/Day/Year)		Code (D) (Instr. 8) (Instr. 3, 4 and 5)				(D) or Indirect (I)	Beneficial Ownership		
		(Woldsburg	y/ 1 cur)	(1134.0)	(11301.5,	i unu	5)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price ¢	(
Common Stock	03/29/2010			Р	5,000	А	\$ 7.75	10,000	Ι	By trust (1)	

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.

 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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amou Under Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships						
F8	Director	10% Owner	Officer	Other				
MOERBEEK PETER J C/O PRIMORIS SERVICES CORPORATION 26000 COMMERCENTRE DR. LAKE FOREST, CA 92630		Х		Exec. VP, CFO				
Signatures								
/s/ Peter J. Moerbeek	03/30/2010							

<u>**</u>Signature of Reporting Person

Date

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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).
- (1) Shares of Common Stock held by Moerbeek family trust U/A dated 03/03/1999, a revocable trust, of which Mr. Moerbeek is trustee and beneficiary.

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.