FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Check this box if no longer subject to 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 [*] BARTELS WILLIAMS H						2. Issuer Name and Ticker or Trading Symbol SPAR GROUP INC [SGRP]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner				
(Last) C/O SPA	(First) (Middle) SPAR GROUP, INC.				3. Date of Earliest Transaction (Month/Day/Year) 03/11/2014										X Office Dela	,		ner (specify ow)	
333 WESTCHESTER AVE, SOUTH BLDG, STE 204					4. If Amendment, Date of Original Filed (Month/Day/Year)									5. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person					
(Street) WHITE PLAINS NY 10604															For	Form filed by More than One Reporting Person			
(City)	(Sta	(State) (Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Da				Date	Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dis			. Securities Acquired (Disposed Of (D) (Instr. 3 nd 5)			Secu Bene Owne	nount of rities ficially ed owing	6. Ownersh Form: Direc (D) or Indirect (I) (Instr. 4)		
									Code	v	Amount	(A (D) or)	Price	Repo Tran			(1154.14)	
Common Stock, \$.01 par value 03/11/2					2014)14			S		2,500		D	\$ <mark>2.0</mark>	3 5,3	03,438(1)	D		
Common Stock, \$.01 par value 03/12/20					2014	014			S		3,003		D	\$2.0	3 5,3	00,435(1)	D		
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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any		Execut if any	ion Date,	Code (Ir	Transaction Code (Instr.		mber rities ired r osed) 3, 4	6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amou or Numb		str. unt	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	Ownersl Form: Direct (I or Indir (I) (Instr 4)	Beneficial Ownership ect (Instr. 4)	
			Code V		(A) (D)		Date Exercisable		xpiration Date	Title	of Shar	es							
Explanation	n of Respons	A6.																	

1. Includes 687,725 shares indirectly owned through benefit plans and trusts.

/s/ William H. Bartels

03/14/2014

** 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.