FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0362						
Estimated average burden							
hours per response:	1.0						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Form 3 Holdings Reported.

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

repart to Section 16(a) of the Securities Eychange Act of 1934

Form 4	Transactions	Reported.	Filet	or Section					Company A			+								
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) (First) (Middle) C/O SPAR GROUP INC					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2010									er (give titl v)	itle O		ther (specify elow)			
560 WHITE PLAINS ROAD, SUITE 210			4. If Amen											dividual or Joint/Group Filing (Check Applicable						
(Street) TARRYTOWN NY 10591			10591	-	Line) X										·					
(City)	(S:	tate)	(Zip)									<u> </u>								
		1	le I - Non-Deri		uriti		cquire			-		icial	-							
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Da if any	ite,	3. Transaction Code (Instr.				equired (A) or) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially		6. Ownership Form:		7. Nature of Indirect Beneficial				
		(onth/Day/Year)		8)		Amount		Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)				
Common Stock, \$.01 par value													4,759,106(1)			D				
Common Stock, \$.01 par value													20,20	2(1)(4)		D				
Common Stock, \$.01 par value													246,300(1)		I		Footnote:(2)			
Common Stock, \$.01 par value												172,4	,432(1)		I 40		(k) Plan			
		T	able II - Deriva (e.g., p	itive Secur									Owned							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3A. Deemed Execution Date Month/Day/Year) if any	3A. Deemed Execution Date,	4. Transaction Code (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 and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficial Ownership		
					(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber								
Series A Preferred Stock	(1)(3)						(3)		(3)	Stock, \$.01 pa	215,0	501		215,6	01	I	F	Footnote:(2)		

Explanation of Responses:

- 1. Beneficial ownership of such shares or options at December 31, 2010.
- 2. Beneficially owned as a beneficiary under WHB Services, Inc. Incentive Savings Plan and Trust.
- 3. Each share of Series A Preferred Stock is convertible at any time in accordance with its terms into one share of SGRP's Common Stock upon receipt of a conversion request from the holder in his discretion. There is no conversion price or other charge for conversion, and the conversion right has no expiration date and continues so long as such preferred share is outstanding
- 4. Common Stock was purchased by the Administrator of the Employee Stock Purchase Plan from time to time and is beneficially owned at 12/31/2010.

Remarks:

/s/ William H. Bartels

02/14/2011

** 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.