FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
ours per respons	se 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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)																	
1. Name and Address of Reporting Person *- White Paul T				2. Issuer Name and Ticker or Trading Symbol ERA GROUP INC. [ERA]									.,	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O ERA GROUP INC., 818 TOWN & COUNTRY BLVD., SUITE 200				3. Date of Earliest Transaction (Month/Day/Year) 09/21/2018									-						
(Street)													6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person						
HOUS TO	ON, TX 77	(State)		(Zip)				T. 1.1			• 4•								
		()	_													• •	Beneficially (1	
1.Title of Security (Instr. 3)			Date	2. Transaction Date (Month/Day/Year)	Exec	Deemed cution Date, if	(Instr. 8)		ction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Following	Ownership Form:	7. Nature of Indirect Beneficial	
						(Month/Day/Y			ode	V	Amou	(A) or (D)	Prio	ce	(Inst. 5 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock 09/21/2018						S		3,500	D	\$ 12.1 (1)	15	53,029.168 (2).			D				
Reminder:	Report on a s	separate line f	or each	class of securi	- Deri	ivative S	ecur	rities A	Acqui	Pers cont the f	ons w tained form d	tho resp in this isplays	form a cui Benefi	are rren iciall	not req	d OMB cor	formation spond unles trol number	s	1474 (9-02)
1 Title of	12	3. Transactio		3A. Deemed	(e.g.	, puts, ca	<u> </u>	warra 5.	ints, o	•					e and	9 Dries of	9. Number of	10.	11. Natur
Security (Instr. 3)	Conversion or Exercise Price of Derivative Security			Execution Da		Transact Code	tion			6. Date Exercisable and Expiration Date (Month/Day/Year)			Aı Uı Se	mounder nder ecuri nstr.	nt of lying		Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficia Ownershi (Instr. 4)
						Code		(A)	(D)	Date Exerc	cisable	Expirati Date	on Ti	itle [Amount or Number of Shares				

Reporting Owners

Peneuting Owner Name / Adduses	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
White Paul T C/O ERA GROUP INC. 818 TOWN & COUNTRY BLVD., SUITE 200 HOUSTON, TX 77024			SVP, Commercial					

Signatures

/s/Tomas Johnston, attorney in fact 09/24/2018

**Signature of Reporting Person Date

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).
- The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$12.00 to \$12.39, inclusive. The reporting (1) person undertakes to provide to Era Group Inc., any security holder of Era Group Inc., or the staff of the Securities and Exchange Commission, upon request, full information
- (2) Includes 163.25 shares of common stock acquired at \$8.04 per share on August 31, 2018 pursuant to the Issuer's 2013 Employee Stock Purchase Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

regarding the number of shares sold at each separate price within the ranges set forth in footnote (1) to this Form 4.

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.