

(Print or Type Responses)

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

OMB APPI	ROVAL			
OMB Number:	3235-0104			
Estimated average burden				
hours per respons	se 0.5			

#### INITIAL STATEMENT OF 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

Name and Address of Reporting Person * Brass Lorin L.	2. Date of Event I Statement (Montl 06/11/2020				3. Issuer Name and Ticker or Trading Symbol Bristow Group Inc. [VTOL]			
C/O BRISTOW GROUP INC., 3151 BRIARPARK DRIVE, SUITE 700	00/11/20	020			all applicable)	Filed(Mon	5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) HOUSTON, TX 77042				X Director Officer (give title below)	e 10% Own Other (spe below)	6. Individ	6. Individual or Joint/Group Filing(Check Applicable Line)  X_Form filed by One Reporting Person  Form filed by More than One Reporting Person	
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned						
1. Title of Security (Instr. 4)		Ве	*		4. Nature of Indire (Instr. 5)	ture of Indirect Beneficial Ownership 5)		
Reminder: Report on a separate line for each class of Persons who responding unless the form disp	d to the co lays a curr	ollection of	of informa d OMB co	ation contained in th				
1. Title of Derivative Security 2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		s 4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security: Direct	Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Exercisable	Expiration Date	Title Sha	nount or Number of	Security	(D) or Indirect (I) (Instr. 5)		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Brass Lorin L. C/O BRISTOW GROUP INC. 3151 BRIARPARK DRIVE, SUITE 700 HOUSTON, TX 77042	X				

### **Signatures**

/s/ Justin D. Mogford, Attorney-in-Fact for Lorin L. Brass		
**Signature of Reporting Person	Date	

## **Explanation of Responses:**

#### No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

#### Remarks:

Exhibit List: Exhibit 24 - Power of Attorney

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.