FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|------------------|
| | | | |

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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* DUGANIER BARBARA J | | | | | 2. Issuer Name and Ticker or Trading Symbol MRC GLOBAL INC. [MRC] | | | | | | | | | ck all app | tionship of Reportir all applicable) Director | | 10% O | vner | |
|--|--|---------|--|-----------------|--|---|--|---|---------------------|---|--|---------------------------------------|-------------------------------|---|---|---|---|--|---------|
| _ | (Fir GHT TOW | ER | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/07/2020 | | | | | | | | | Office below | fficer (give title elow) | | Other (below) | specify |
| 1301 MCKINNEY ST., SUITE 2300 | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | | |
| (Street) | ON TX | 7 | 7010 | | | | | | | | | | | 2 | C Form | filed by One filed by Moi on | • | Ü | |
| (City) | (Sta | ate) (Z | Zip) | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | Execution Date, | | Date, | Transaction Disposed Of (D Code (Instr. 5) | | s Acqu Of (D) (I | s Acquired (A) of f (D) (Instr. 3, 4 a | | 5. Amo Securit Benefic Owned | ties cially I Following | Form: | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or | Price | Transa | ction(s) 3 and 4) | | | (|
| Common Stock 05/07/2 | | | 2020 | | | | A 19,27 | | 19,273(1) |) / | A | \$0.00 | 54 | 54,326 | | D | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| Derivative Conversion Date Security Or Exercise (Month/Day/Year) if a | | if any | tion Date, Trai Coc h/Day/Year) 8) | | (Instr. Derivative Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | vative urities uired or osed) r. 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration | | ite ear) | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | str. | . Price of Perivative Security Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | / E | LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | Code | Code V (A) (D) | | Exercisable Date | | Title Shares | | es | | | | | | | | | |

Explanation of Responses:

1. Represents shares of restricted common stock awarded to the reporting person on 5/07/2020 that will vest on 5/07/2021, conditioned on the reporting person's continued service as a director of the issuer and subject to (a) pro-rata vesting if the reporting person's service as a director terminates prior to 5/07/2021 and (b) accelerated vesting under certain circumstances.

Remarks:

/s/ Ann D. Garnett, by power

05/11/2020

of attorney

** 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.