FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

l	OMB APPR	OVAL						
	OMB Number:	3235-0287						
Estimated average burden								
l	hours ner resnonse.	0.5						

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

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* <u>Price Colin</u>					2. Issuer Name and Ticker or Trading Symbol HEIDRICK & STRUGGLES INTERNATIONAL INC [HSII]										all applic Directo Officer	able)	g Pers	on(s) to Issu 10% Ov Other (s	ner	
(Last) (First) (Middle) 233 S. WACKER DRIVE SUITE 4900					03/0	3. Date of Earliest Transaction (Month/Day/Year) 03/09/2017 4. If Amendment, Date of Original Filed (Month/Day/Year)								Executive VP						
(Street)) IL	6	0606		4. IT A	Ame	nament, I	Date o	of Original	Filea	(Month/Da	y/Year)		ine) X	Form fi	led by One led by Mor	e Repo	(Check Apporting Person	1	
(City)	(Sta	, ,	Zip)									_								
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Trans Date (Month/I								3. 4. Securiti Transaction Code (Instr. 5)			ties Acquir	ed (A) or	or 5. Amoun 4 and Securities Beneficia Owned Fo		s ally ollowing	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o	Price	:	Reported Transact (Instr. 3 a	ion(s)			Instr. 4)	
Common Stock ⁽¹⁾				03/09	9/2017		03/09/2017		A		623	A	(2	!)	6	523		D		
Common S	Stock ⁽¹⁾			03/09)/2017		03/09/	2017	F		293	D	\$24	4.3 330				D		
		Ta	able II - I												wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any	cution Date, Transaction of		6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)				nd of s ng e Securit	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amour or Number of Shares	er						
2016 Restricted Stock Units	(2)	03/09/2017	03/09/2	017	М			623	(3)		(3)	Common Stock	(4)		(2)	1,248	3	D		
2017 Restricted Stock Units	(2)	03/09/2017	03/09/2	017	A		4,494		(3)		(3)	Common Stock	(4)		(2)	5,742	2	D		
2017 Performance Stock Units	(2)	03/09/2017	03/09/2	2017	A		4,494		(3)		(3)	Common	(4)		(2)	4,494	1	D		

Explanation of Responses:

- 1. Reflects shares acquired from the 2016 RSU vesting reported on Table II.
- 2. The number of RSUs or PSUs awarded to the Reporting Person was determined by dividing the total dollar value of compensation granted to the Reporting Person by the closing price of HSII common stock on the grant date of March 9, 2017.
- 3. RSUs are service-based and will vest in three equal installments on the first, second and third anniversaries of the date of grant. PSUs are target-based equity grants that generally vest three years from the grant date if certain performance goals are achieved.
- 4. Granted under the Company's Global Share Plan. Each RSU or PSU represents a right to receive one share of the Issuer's Common Stock upon vesting.

Remarks:

/s/ Stephen W. Beard, Attorney- 03/13/2017 **In-Fact**

** 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.