FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL						
OMB Number:	3235-0104					
Estimated average burden						
hours per response:	0.5					

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

TZ TZ': 11 (1:				ate of Event Requiring ement (Month/Day/Year) 19/2024 3. Issuer Name and Ticker or Trading Symbol HEIDRICK & STRUGGLES INTERNATION.						AL IN	<u>IC</u> [HSII]	
(Last) C/O HEIDRICK (233 S. WACKER (Street)				4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director		fy below)	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
CHICAGO (City)	IL (State)	60606 (Zip)									rom liled by i	More than One Reporting Person
(Oily)	Table I - Non-Derivative Securities Beneficially Owned											
				. Amount	of Securities Beneficially str. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) 4. Nature of Indirect Benefic			neficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)		Exp	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Under Derivative Security (Instr. 4)		Conv		5. Ownership Form: Direct (D) or Indirect of (I) (Instr. 5)		6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		Date Exe		Expiration Date	Title		Amount o Number o Shares	Deriva	tive	(1) (111547. 5)		

Explanation of Responses:

Remarks:

Exhibit List: Exhibit 24 - Power of Attorney

No securities are beneficially owned.

/s/ Antony Gabriel, Attorney-In-Fact 09/30/2024

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).

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EDGAR Access Codes

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