FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| | | |

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

OMB APPROVAL

OMB Number: Estimated average burden hours per response: 0.5

| Filed | | 16(a) of the Inves | | | 934 |
|-------|------|--------------------|------|--|-----|
| | | | | | |

| 1. Name and Address of Reporting Person* PEPPING KAREN K | | | | | 2. Issuer Name and Ticker or Trading Symbol HEIDRICK & STRUGGLES INTERNATIONAL INC [HSII] | | | | | | | | | | k all appli Directo Officer | tionship of Reporting all applicable) Director Officer (give title below) | | 10% Owne Other (spe below) | |
|---|---------|--|--------------------------------------|---|---|---|------------|-----------------------------------|--|---|-----------|---------------------------------------|--|-------------------------------------|--|---|---|---|------------|
| | DRICK & | irst) STRUGGLES II RIVE, SUITE 4! | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/07/2016 | | | | | | | , | P, CAO a | and Conti | roller | | | | |
| (Street) CHICAC | GO IL | tate) | 60606 (Zip) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) Ative Securities Acquired, Disposed of, or Benefi | | | | | | | 6. Individual or Joint/Group Filing (Check Applica Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | n | |
| 1. Title of Security (Instr. 3) | | ie i - Nor | 2. Transaction Date (Month/Day/Year) | | 2 Ear) if | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, | | |) or 5. Amor 4 and Securiti Benefic Owned | | int of es ially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | rect (irect (4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | (A) o (D) | Pric | e | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common Stock 03 | | 03/07 | /2016 | 2016 03/07/20 | | 7/2016 | A | | 2,29 | 0 A | | (1) | 4, | ,580 | D | | | | |
| Common | Stock | | | 03/07/2016 | | 5 | 03/07/2016 | | F | | 709 | D | \$24 | 4.27 | 7 3,871 | | D | | |
| | | Т | able II - I | | | | | | | | | , or Ben ble sec | | | Owned | | | | |
| Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any | | 3A. Deeme Execution if any (Month/Day | Date, | 4. Transaction Code (Instr. 8) | | n of E | | Expiratio | 6. Date Exercisab Expiration Date (Month/Day/Year) | | Amount of | | Di Si (li | Perivative Security Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Owr Fori Dire or Ir (I) (I | nership n: ect (D) ndirect nstr. 4) | 11. Nature of Indirect Beneficial Ownershi (Instr. 4) | |
| | | | (| Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amour or Number of Shares | er | | | | | | |
| 2014 Restricted Stock | (1) | 03/07/2016 | 03/07/20 | 016 | M | | | 2,290 | (3) | | (3) | Common Stock | (2) | | (1) | 8,529 | | D | |

Explanation of Responses:

- 1. The number of RSUs 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 7,2014.
- 2. Granted under the Company's Global Share Plan. Each RSU represents a right to receive one share of the Issuer's Common Stock upon vesting.
- 3. The RSUs are service-based and will vest in three equal installments (specifically on the first, second and third anniversaries of the date of grant) generally subject to the Reporting Person's continued employment with the company.

Remarks:

Units⁽²⁾

/s/ Stephen W. Beard, 03/09/2016 Attorney-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.