FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C.	20549
---------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPR	OVAL				
OMB Number:	3235-0287				
Estimated average but	rden				
hours per response:	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* Deth James II.						2. Issuer Name and Ticker or Trading Symbol Huron Consulting Group Inc. [HURN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Roth James H						Traion Consulting Group Inc. [110100]								X Director		ctor		10%	Owner	
(Last) 550 WES	(Fi	rst) (IREN STREET	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/10/2014								X	Offic below	,		Othe belov esident	r (specify v)	
(Street)			50607		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)) 【 Forn Forn	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(51	ate) (.	Zip)																	
		Tabl	e I - N	lon-Deriv	ative/	Sec	uritie	s Ac	quire	ed, Di	sposed o	f, or B	enefic	iall	y Own	ed				
Date			2. Transact Date (Month/Day		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Beneficially Owned Following		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	ion(s)			(Instr. 4)	
Common Stock 11/10/20				014	14			S ⁽¹⁾		5,282	D	\$69.7	['] 6 ⁽²⁾ 191		,621		D			
Common	Stock			11/10/2	014				S ⁽¹⁾		2,218	D	\$70.2	25 ⁽³⁾ 189,403 D				D		
Common	Stock														3,	3,855 I By Famil Partnersh				
		Та	ble II								osed of, convertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, I/Day/Year)	4. Transa Code (8)	(Instr.	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed	Expir (Mon	te Exerciation D th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ıt		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. Automatic sale pursuant to a 10b5-1 plan.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$69.14 to \$70.12. The undersigned undertakes to provide Huron Consulting Group Inc. ("Huron"), any security holder of Huron or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (2) to this Form 4.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$70.14 to \$70.45. The undersigned undertakes to provide Huron, any security holder of Huron or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (3) to this Form 4.

Remarks:

Diane E. Ratekin, Attorney-infact for James H. Roth

11/12/2014

** 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.