FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

Washington, I	D.C.	20349

OMB APPROVAL

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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

Name and Address of Reporting Person* Roth James H						2. Issuer Name and Ticker or Trading Symbol Huron Consulting Group Inc. [HURN]								(Che	elationshi ck all app Direc	*		()	Issuer Owner	
(Last) (First) (Middle) 550 WEST VAN BUREN STREET						3. Date of Earliest Transaction (Month/Day/Year) 02/10/2015									Offic below	,		Othe below resident	er (specify w)	
(Street) CHICAGO IL 60607 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									individual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - N	lon-Deriv	ative/	Sec	uritie	s Ac	quire	ed, Di	sposed o	f, or B	enefic	iall	y Own	ed				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		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			5. Amount of Securities Beneficially Owned Following Reported		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		Transac (Instr. 3	ction(s)			(Instr. 4)			
Common	Stock			02/10/2	015				S ⁽¹⁾		6,450	D	\$76.7	'3 ⁽²⁾	(2) 181,346 D					
Common	Stock			02/10/2	015				S ⁽¹⁾		1,050	D	\$77.3	32 ⁽³⁾	180,296			D		
Common	Stock													1 3855 1 1 1				By Family Partnership		
		Та	ıble 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 tion Date, n/Day/Year)	4. Transa Code (8)	Instr.	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rities ired osed : 3, 4	Expir (Mon	6. Date Exercisable and Expiration Date Date Expiration Expiration Date Expiration		7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4) Amount of Or Number of Security Security (Instr. : Security Security (Instr. : Security Security (Instr. : Security Security Security Sec		_		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 \$76.17 to \$77.16. 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 \$77.22 to \$77.51. 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:

<u>Diane E. Ratekin, Attorney-in-</u> fact for James H. Roth

02/12/2015

** 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.