FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Roth James H					2. Issuer Name and Ticker or Trading Symbol Huron Consulting Group Inc. [HURN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 550 WEST VAN BUREN STREET						3. Date of Earliest Transaction (Month/Day/Year) 09/04/2024								Officer (give title Other (spe below) below)					
(Street) CHICAC		ate) (Z	0607 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)							l	ine)	<u> </u>					
		Table	I - No	on-Deriva	tive	Secui	rities A	quire	ed, Di	sposed o	f, or E	Benefic	ially	Own	ed				
1. Title of Security (Instr. 3)		0	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)				4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			and 5) Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	V	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)						
Common Stock				09/04/2024				S		1,849(1)	D	\$108.	8.06(2)		8,976	D			
Common Stock			09/04/2024				S		151 ⁽¹⁾	D	\$108.	54 ⁽²⁾	58,825		D				
Common	Stock													1 ' 1 '			By Family LLC		
		Tal	ble II -							posed of, convertib)wne	d	,			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Execu (Month/Day/Year) if any		eemed ition Date, h/Day/Year)	4. Transa Code 8)		5. Number of Derivativ Securitie Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expiration (Month/Day			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Deri Seci (Inst	rice of vative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form Direct or Ind (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)	
					Code	v	(A) (D)	Date Exe	e rcisable	Expiration Date	Title	Amount or Number of Shares							

- 1. The reported sale of 2,000 shares occurred automatically pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on May 18, 2024.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at a range of \$107.395 \$108.36 for the sale of 1,849 shares and a range of \$108.46 -\$108.71 for the sale of 151 shares. 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.

Remarks:

/s/ Hope Katz, Attorney-infact for James H. Roth

09/06/2024

** 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.