FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Vashington.	D.C.	20549	

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Instruction 1(b).

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 (Last) (First) (Middle) 550 WEST VAN BUREN STREET			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							
				3. Date of Earliest Transaction (Month/Day/Year) 10/02/2024									Officer (give title below)		Other (sp below)		pecify	
(Street) CHICAC			0607 Zip)		4. 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							
		Table	I - Non-De	eriva	tive	Secui	rities A	quire	ed, Di	sposed of	, or E	enefic	ially	Own	ed			
1. Title of Security (Instr. 3)		2. Trans Date (Month		Executi y/Year) if any			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			and 5) Securities Beneficially Owned Following		ties cially d Following	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)	
Common Stock		10/0	10/02/2024				S		1,700(1)	D	\$106.	39 ⁽²⁾	57,125		D			
Common	ommon Stock		10/0	2/202	24			S		300(1)	D	\$107.	11 ⁽²⁾ 56,		6,825	D	D	
Common Stock													3	3,855	I	1	By Family LLC	
		Tal	ole II - Der (e.g							oosed of, convertib				Owne	d			
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	te Execution Date, onth/Day/Year) if any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	erivative (Month/Date curities cupired) or sposed (D) sstr. 3, 4		Date Amor y/Year) Secu Unde Deriv		ount of Securities erlying vative urity (Instr.		Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership	
					Code	v	(A) (D)	Date Exe	e rcisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. The reported sale of a total 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 prices ranging from \$105.79 \$106.77 for the sale of 1,700 shares and at prices ranging from \$107.04 - \$107.25 for the sale of 300 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

10/04/2024

** 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.