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(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*     EDWARDS JAMES D						2. Issuer Name and Ticker or Trading Symbol Huron Consulting Group Inc. [ HURN ]										all app		ng Per	10% C	wner
	RON CONS	(First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 04/01/2016									Office below	er (give title v)		Other ( below)	(specify
550 WEST VAN BUREN STREET  (Street)  CHICAGO IL 60607					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indiv ine) X	<i>'</i>				
(City) (State) (Zip)																				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						Execution Date			Transaction Disposed (			es Acquired (A) or Of (D) (Instr. 3, 4 a			nd 5) Secur Benef		cially d Following	Forn (D) c	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) (D)	or [	Price		Transaction(s) (Instr. 3 and 4)				(1130.4)
Common Stock 04/01/2									S <sup>(1)</sup>		317	D \$5		\$ <mark>56</mark> .	6 <sup>(2)</sup> 18,666		8,666		D	
Common Stock 04/01/2									S <sup>(1)</sup>		274	D \$58		\$58.3	35 <sup>(3)</sup> 18		8,392		D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Execution if any (Month/I		4. Transacti Code (Ins				6. Date Exercis Expiration Dat (Month/Day/Ye		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4)				rative rity :. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	F C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or	ount nber res						

## **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 \$56.34 to \$57.00. 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 \$58.01 to \$58.72. 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.

Diane E. Ratekin, Attorney-infact for James D. Edwards

04/05/2016

\*\* 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.