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Huron Consu	lting Group Ind	с.											
Form 4													
May 04, 2006	5												
FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL				
	UNITEI	O STATES		ITIES Al hington,			NGE (COMMISSION	OMB Number:	er: 3235-0287			
Check this box								Expires:	January 31,				
if no longe	er STATE	MENT O	F CHAN	GES IN I	BENEFI	ENEFICIAL OWNERSHIP OF				2003			
subject to					ECURITIES					Estimated average burden hours per			
Form 4 or							response 0.8						
Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						ge Act of 1934,	·						
obligation may conti		7(a) of the	Public Uti	ility Hold	ing Com	pany	Acto	f 1935 or Sectio	on				
See Instru		30(h)	of the Inv	vestment (Company	y Act	of 19	40					
1(b).													
(Print or Type R	esponses)												
1. Name and Ad	2 Issuer	2. Issuer Name and Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer						
AUSLEY D	Symbol												
			•	Huron Consulting Group Inc.									
	[HURN]					(Check all applicable)							
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction			X Director	10%	6 Owner			
		(Month/Day/Year)					Officer (give title Other (specify						
C/O HURON	N CONSULTIN	NG	05/02/20	-				below)	below)				
GROUP, 550) WEST VAN	BUREN											
STREET													
(Street) 4. If Amendment, Date Original 6. Individual 6						6. Individual or J	Joint/Group Filing(Check						
	Filed(Month/Day/Year)					Applicable Line)							
								X Form filed by					
CHICAGO,	IL 60607							Person	More than One Ro	eporting			
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f. or Beneficia	llv Owned			
1.Title of	2. Transaction D	ate 24 Dec		3.	4. Securi			5. Amount of	6. Ownership	-			
Security				n Date, if TransactionAcquired (A) or					Form: Direct				
(Instr. 3)	`` `	any			Code Disposed of (D)				(D) or Ber	Beneficial			
		(Month/	Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			5)	Owned	Indirect (I)	Ownership				
								Following Reported	(Instr. 4)	(Instr. 4)			
						(A)		Transaction(s)					
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)					
Common	05/02/2006			А	5,700	А	\$0	16,450	D				
Stock					(1)		÷ Ŭ	-,					

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1 77.4 0	2		24 D 1	4	5		• • • •	7 T.U		0.0.	0.11
1. Title of	2. Conversion	3. Transaction Date		4. Transact	5.	6. Date Exer		7. Titl		8. Price of	9. Nu Daria
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		onNumber	Expiration D		Amou		Derivative	Deriv
Security	or Exercise		any (Month/Dov/Voor)	Code	of Domination	(Month/Day	(Tear)	Under		Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)				Securi		(Instr. 5)	Bene
	Derivative				Securities			(Instr.	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						D .			or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
					() (-)						

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Reporting Owners

Reporting Owner Name / Address					
	Director	10% Owner	Officer	Other	
AUSLEY DUBOSE C/O HURON CONSULTING GROUP 550 WEST VAN BUREN STREET CHICAGO, IL 60607	X				
Signatures					
Natalia Delgado, Attorney-in-fact for Du Ausley	05/04/2006				
**Signature of Reporting Person			Date		
Evalenction of Deenen	0001				

Explanation of Responses:

- * 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).
- (1) Huron Consulting Group Inc. awarded restricted stock to reporting person.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.