FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	
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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

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*     Cullen Michael M						2. Issuer Name and Ticker or Trading Symbol HEIDRICK & STRUGGLES INTERNATIONAL INC [ HSII ]									all app Direct	onship of Reportin all applicable) Director Officer (give title below)		10% Ov	
(Last) (First) (Middle) C/O HEIDRICK & STRUGGLES INT'L, INC. 233 S. WACKER DRIVE, SUITE 4900					3. Date of Earliest Transaction (Month/Day/Year) 09/29/2021										hief Opera		,		
(Street) CHICAGO IL 60606 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								i. Indiv ine) X					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				2. Transaction Date (Month/Day/Ye	Execution		n Date,		Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Benefic		ties cially I Following	6. Owne Form: D (D) or Indirect (Instr. 4)	rect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Co	ode	v /	Amount	(A) or (D)	Price	Trans		action(s) 3 and 4)	(111341.4)		(1115411 4)	
Common Stock				09/29/202	21 09/29		/2021	1	S		1,300	D	\$43.32	)2 <sup>(1)</sup> 18,37		377.444	D		
Common Stock			09/29/202	21 09/29		9/2021		S		3,933	D	\$44.54	16 <sup>(2)</sup>	14,444.444		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)	Exe if ar	Deemed cution Date, iy nth/Day/Year)		saction e (Instr.	5. Numl of Derivat Securit Acquire (A) or Disposi of (D) (Instr. 3 and 5)	ive ies ed	Expiration Date (Month/Day/Year)				le and unt of rities erlying rative rity (Instr. i 4)	Deri Sec (Ins	rice of ivative curity ctr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D) or Indirec (I) (Instr.	n: ct (D) idirect	Beneficial Ownership t (Instr. 4)
					Code	Code V (A)			Date Exe	e rcisable	Expiration Date	Title	Amount or Number of Shares						

## **Explanation of Responses:**

- 1. The price reported in Column 4 is a weighted average price. Michael M. Cullen sold 1,300 shares in multiple transactions at prices ranging from \$42.89 to \$43.79 per share, inclusive. The reporting person undertakes to provide to Heidrick & Struggles International, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote (1) to this Form 4.
- 2. The price reported in Column 4 is a weighted average price. Michael M. Cullen sold 3,933 shares in multiple transactions at prices ranging from \$43.93 to \$44.91 per share, inclusive. The reporting person undertakes to provide to Heidrick & Struggles International, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote (2) to this Form 4.

## Remarks:

/s/ Kelly A Crosier, Attorney-

09/30/2021

In-Fact

\*\* 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.