CHADWICK JAMES M

Form 4

January 03, 2019

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB

5. Relationship of Reporting Person(s) to

Issuer

Number: 3235-0287

OMB APPROVAL

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

2. Issuer Name and Ticker or Trading

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

Symbol

1(b).

(Print or Type Responses)

CHADWICK JAMES M

1. Name and Address of Reporting Person *

			Hill International, Inc. [HIL]					(Check all applicable)				
(Last) (First) (Middle) 6060 PARKLAND BOULEVARD, SUITE 200			3. Date of Earliest Transaction (Month/Day/Year) 12/28/2018					_X_ Director 10% Owner Officer (give title below) Other (specify below)				
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
CLEVELAN						Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecuri	ties Acq	uired, Disposed o	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	Execution any	med on Date, if Day/Year)	3. Transaction Code (Instr. 8)		sposed	(A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock, par value \$0.01 per share								25,407 (3)	D			
Common Stock, par value \$0.01 per share	12/28/2018	01/02/2	2019	P	12,518	A	\$ 2.75	1,054,057 (1)	I	See Footnote (2)		

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

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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. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration Date		Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						· ·
					4, and 5)						
									Amount		
						Date	Expiration	m: 1	or		
						Exercisable	Date	of	Number		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CHADWICK JAMES M 6060 PARKLAND BOULEVARD, SUITE 200 X CLEVELAND, OH 44124

Signatures

James M Chadwick 01/03/2019

**Signature of Date Reporting Person

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).
- The Catalyst Fund owns the shares directly. Mr Chadwick by virtue of his position as a Director of Ancora Advisors LLC, the General Partner of the Fund and as Portfolio Manager of the Fund may be deemed to beneficially own the shares owned directly by the Fund. Ancora Advisors LLC maintains a pecuniary interest for its role as investment manager & general partner. The Reporting Person disclaims beneficial ownership in such securities except to the extent of his pecuniary interest therein.
- (2) The shares are being reported as indirectly owned by the reporting party due to their new status as director.
- (3) The shares represent deferred stock units.

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.

Reporting Owners 2