FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

1. Name and Address of Reporting Person*																		Relationship of Reporting Person(s) to Issuer (Check all applicable)						
OFFENSEND DAVID G						HUDSON HIGHLAND GROUP INC [HHGP]												recto	•		10% O	wner		
(Last) (First) (Middle) C/O NY PUBLIC LIBRARY, 5TH AVE AND 42ND ST, RM 210						3. Date of Earliest Transaction (Month/Day/Year) 09/16/2008												ficer low)	(give title		Other (below)	specify		
(Street) NEW YORK NY 10018					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						on		
(City)	(S		(Zip)																					
			le I - Nor			_			-		Disp						_							
				2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)			Transaction D Code (Instr. 5)			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Securiti Benefic		es ally Following	Form (D) o	n: Direct r Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									C	ode	v	Amount		(A) or (D)	P	rice	Trar	ısact	ion(s) and 4)			(111501.4)		
Common Stock 09/16					5/2008	/2008		09/18/2008		A		355		A	5	\$8.18		27,263.81		I		By Deferred Comp Plan ⁽¹⁾		
Common Stock																		55,	000		D			
Share Units ⁽²⁾									T	\neg								4,187.2891			D			
		Т	able II -	Deriva (e.g., p													Own	ed		,				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	ed Date,	4. Transa Code (8)	ction	5. Number of		6. Dat Expira		rcisal Date	ole and 7. Title of Sec Under Deriva		ritle and Amount Securities derlying ivative Security str. 3 and 4)		rity	8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	isable		epiration ate	Title		Amo or Num of Shar	ber								
Director Stock Option	\$6.83								(3	3)	04	/11/2013	Com Sto		50,0	000			50,000)	D			

Explanation of Responses:

- 1. Balance reflects the reporting person's holdings in the Hudson Highland Group, Inc. Deferred Compensation Plan as of the date of this filing.
- 2. Share Units credited to the reporting person's account under the Hudson Highland Group, Inc. Director Deferred Share Plan. Each Share Unit is the economic equivalent of one share of Common Stock. Share Units are payable only in Common Stock after a director's Separation from Service.
- 3. Grant to reporting person of option to buy shares of common stock under the Hudson Highland Group, Inc. Long Term Incentive Plan. The option vests and becomes exercisable as follows: 40% immediately upon the date of grant, 60% after 1st anniversary of the date of grant, 80% after 2nd anniversary, and 100% after 3rd anniversary.

Remarks:

Buy)

John K. Wilson, Attorney-in-

09/18/2008

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.