FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20049	
STATEMENT OF CHANGES IN BENEFICIAL OWNE	<b>RSHIP</b>

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l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burd	en
l	hours per response:	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*     Bielinski Don					HU	2. Issuer Name and Ticker or Trading Symbol HUDSON HIGHLAND GROUP INC [ HHGP ]										heck all app Direc	tor er (give title	g Pers	10% Ov Other (s	vner
(Last) (First) (Middle) HUDSON HIGHLAND GROUP, INC., 560 LEXINGTON AVENUE					05/	3. Date of Earliest Transaction (Month/Day/Year) 05/30/2008										below	Senior Vio			
(Street) NEW YORK NY 10022				-   4.	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line)      X Form filed by One Reporting Person      Form filed by More than One Reporting Person					
(City)	(Si		(Zip)	n Deriv	rative	ive Securities Acquired, Disposed of, or Beneficially Owned														
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			action	ction 2/ Exay/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A)			(A) or	or 5. Amount of Securities Beneficially Owned Followin		6. Ownership Form: Direct (D) or Indirect ng (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										ode	v	Amount	(A (I	) or )	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common	Stock			05/30	0/2008	3				P		5,000		A	\$12.	45 32	,611 <sup>(1)</sup>		D	
Common Stock															1,7	00.036		I	By 401(k) Plan <sup>(2)</sup>	
Common Stock														C	0.357			By Plan <sup>(3)</sup>		
		Т										sed of				y Owned				
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction 3A. Deemed Execution Date Execution Date, If any Code (Instr.			5. Number 6. I				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)			10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	cisable		piration tte	Title	OI N	umber					
Employee Stock Option (Right to Buy)	\$14.08								(	(4)	12	/14/2014	Comm Stocl		6,000		36,000	)	D	
Employee Stock Option (Right to Buy)	\$16								(	(4)	02	/15/2016	Comm		0,000		50,000	)	D	
Employee Stock Option (Right to Buy)	\$16.9								(	(4)	02	/06/2017	Comm Stocl	רו	0,000		50,000	)	D	

## **Explanation of Responses:**

- 1. Includes 4,611 shares previously held through the Hudson Highland Group, Inc. Employee Stock Purchase Plan, which were transferred to the reporting person's personal account on March 20, 2008 and are now owned directly.
- 2. Balance reflects the most current data available with regard to holdings in the 401(k) Plan.
- 3. Balance reflects the reporting person's holdings in the Hudson Highland Group, Inc. Employee Stock Purchase Plan as of the date of this filling.
- 4. 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: 25% after 1st anniversary of the date of grant, 50% after 2nd anniversary, 75% after 3rd anniversary, and 100% after 4th anniversary of the date of grant.

## Remarks:

John K. Wilson, Attorney-in-

06/02/2008

**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.