Instruction 1(b)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
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| rvasiliigtoii, | D.C. | 20343 | |

| Check this box if no longer subject | | | | | | | | |
|-------------------------------------|--|--|--|--|--|--|--|--|
| to Section 16. Form 4 or Form 5 | | | | | | | | |
| obligations may continue. See | | | | | | | | |

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* Coleman Richard Kenneth Jr. | | | | | | 2. Issuer Name and Ticker or Trading Symbol Hudson Global, Inc. [HSON] | | | | | | | | | | o of Reportin licable) tor | ng Per | son(s) to Is 10% O Other (s | wner | |
|---|--|----------|---|-------------------------------|---|--|--|------------------|--|--|------------------------------------|------------|---|--|---------|--|---|---|------------|--|
| (Last) (First) (Middle) 43 GLENMOOR DRIVE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/12/2021 | | | | | | | | | | Officer (give title below) | | below) | ыреспу | |
| (Street) CHERRY HILLS VILLAC | CC | CO 80113 | | | | | 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 | | | | |
| (City) | (Sta | ate) (Z | Zip) | | | | | | | | | | | | | | | | | |
| | | Table | I - Non | n-Deriva | ative S | Secu | rities | Acq | uired, | Dis | posed of | , or E | Bene | ficia | lly Own | ed | | | | |
| Date | | | | 2. Transa Date (Month/D | Day/Year) if a | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securiti Disposed 5) | | | | | | | Form (D) o | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | (A) or (D) | | | ction(s) | | | | |
| Share Units ⁽¹⁾ 11/12 | | | | | 2021 | | | A | | 575(1) | A | 1 | \$ <mark>0</mark> | 64 | 64,599 | | D | | | |
| Common Stock | | | | | | | | | | | | | | 300 | | 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) | rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | str. | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | | | |
| | | | | | Code | | | Date Exercisa | te Expiration ercisable Date | | or Number of Title Shares | | ber | | | | | | | |

Explanation of Responses:

1. Share Units credited to the reporting person's account under the Hudson Global, Inc. (the "Company") 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 up to 90 days after a director's separation from service.

Remarks:

/s/ Matthew K. Diamond,

Attorney-in-Fact for Richard 11/16/2021

K. Coleman, Jr.

** 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.