FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: | 3235-0287 |
|--|------------------------|-----------|
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| | 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

| 1. Name and Address of Reporting Person* Nash Ian V. | | | | | | 2. Issuer Name and Ticker or Trading Symbol Hudson Global, Inc. [HSON] | | | | | | | | | | all app | ionship of Reportir all applicable) Director | | 10% C | wner | |
|--|--|--|---|---------------|---|---|---------|--------------------------------------|-------------------------------------|--|--------------------|--------|------------------------|---------------------|---|---|---|---|--|-----------|--|
| (Last) (First) (Middle) C/O HUDSON GLOBAL, INC. | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/09/2018 | | | | | | | | | | Officer (give title below) | | | Other below) | (specify | |
| 1325 AVI FLOOR | ENUE OF T | ΓΗΕ AMERICA | S, 12TH | | 4. If | Ame | ndment | , Date o | of Origina | l Filed | (Month/Da | ay/Yea | ar) | | Individual or Joint/Group Filing (Check Appliane) | | | | | pplicable | |
| (Street) NEW YC | ORK NY | γ 1 | .0019 | | | | | | | | | | | | X | | n filed by One n filed by Mor on | | | | |
| (City) | (St | | Zip) | | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Noi | n-Deriva | ative | Sec | curitie | s Ac | quired | , Dis | posed o | f, or | Bene | eficia | ally (| Owne | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | ay/Year) Ex | | A. Deemed execution Date, fany Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) I Of (D) (Instr. 3, 4 | | | 4 and Sec Ber Ow | | ecurities eneficially | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | - 1 | Transa | action(s) 3 and 4) | (Instr. 4) | | | |
| Share Uni | ts ⁽¹⁾ | | | 08/09/ | 2018 | | | | A | | 51,735 | (1) | A | \$ | 0 | 26 | 52,577 | 577 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | | | 6. Date E Expiration (Month/I | on Dat | | | str. 3 | | ivative urity tr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | m: ect (D) ndirect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nun of | ount nber res | | | | | | | |

Explanation of Responses:

1. Share Units credited to the reporting person's account under the Hudson Global, 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.

/s/ Ian V. Nash

08/13/2018

** 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.