#### MOORE NICHOLAS G Form 4/A

August 23, 2005

### FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** 

**OMB APPROVAL** 

Number:

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

Check this box

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* MOORE NICHOLAS G

2. Issuer Name and Ticker or Trading

Symbol

**HUDSON HIGHLAND GROUP** 

INC [HHGP]

(Month/Day/Year)

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

(Last)

(First)

(Middle)

(Zip)

3. Date of Earliest Transaction

08/04/2005

X\_ Director 10% Owner Other (specify Officer (give title

below)

C/O BECHTEL CORP., 50 BEALE

**STREET** 

(City)

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

08/08/2005

6. Individual or Joint/Group Filing(Check

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

SAN FRANCISCO, CA 94105

(State)

08/04/2005

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

3. 4. Securities Acquired (A) 5. Amount of Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

(A)

6. Securities Beneficially Owned **Following** Reported (I)

Nature of Ownership Indirect Beneficial Form: Ownership Direct (D) (Instr. 4) or Indirect

(D) Code V Amount

Transaction(s) (Instr. 3 and 4) Price

(Instr. 4)

Ι

Common Stock

 $A^{(1)}$ 338.818 A 21.06

338.818

By Deferred Compensation Plan (2)

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

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 control number.

**SEC 1474** (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

#### Edgar Filing: MOORE NICHOLAS G - Form 4/A

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)	5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D)			Amou Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(Instr. 3, 4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
· · · · · · · · · · · · · · · · · · ·	Director	10% Owner	Officer	Other			
MOORE NICHOLAS G C/O BECHTEL CORP. 50 BEALE STREET SAN FRANCISCO, CA 94105	X						

# **Signatures**

By: John K. Wilson, Attorney-In-Fact 08/23/2005

\*\*Signature of Reporting Person Date

## **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).
- (1) The Form 4 filed on August 8, 2005 inadvertently reported the incorrect Transaction Code in Box 3. This amendment is being filed to report the correct Transaction Code, as the transaction was exempt from Section 16(b) under Rule 16b-3.
- (2) Balance reflects the reporting person's holdings in the Hudson Highland Group, Inc. Deferred Compensation Plan as of the date of this filing.

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.

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