## Edgar Filing: HARTE HANKS INC - Form 4

HARTE HA	NKS INC											
Form 4												
April 18, 201	16											
FORM	FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL		
			SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						3235-0287			
Check thi			Expires:	January 31,								
if no long subject to		FEMENT O	F CHAN	GES IN I	Estimated average							
Section 1		SECUR	burden hours per									
Form 4 of									response	. 0.5		
Form 5 obligation	20	<b>^</b>					•	e Act of 1934,				
may cont				•	•			f 1935 or Section	n			
See Instru 1(b).	uction	30(h)	of the In	vestment	Company	y Act	of 194	10				
(Print or Type F	Responses)											
1. Name and Address of Reporting Person <u>*</u>				2. Issuer Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to				
Shepard Douglas C.			Symbol	-					Issuer			
	HARTE HANKS INC [HHS]					(Check all applicable)						
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					k an applicable)				
			(Month/D	(Month/Day/Year)				Director 10% Owner				
9601 MCAI	04/15/2016					XOfficer (give titleOther (specify below) below)						
FREEWAY	, SUITE 610							· · · · · · · · · · · · · · · · · · ·	Financial Offic	er		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
	Filed(Mon	th/Day/Year)	)			Applicable Line)						
								_X_Form filed by C	One Reporting Pe Iore than One Re			
SAN ANTO	ONIO, TX 782	216						Person		porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction	Date 2A. Dee	on Date, if Transaction(A) or Disposed of (D)					5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Y							Securities	Form: Direct Indirect			
(Instr. 3)		any (Month/	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)				5)	Beneficially Owned		Beneficial Ownership		
		(Wond)	Duy, Iour) (Insu: 0)						(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
a				Code V	Amount	(D)	Price	(Instr. 5 and 1)				
Common	04/15/2016			F	6,561	D	\$	201,940	D			
Stock					(1)		2.69					
Common	04/15/2014			А	75,000	А	\$0	276,940	D			
Stock					(2)		÷Ŭ					

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.

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 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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
, s	Director	10% Owner	Officer	Other				
Shepard Douglas C. 9601 MCALLISTER FREEWAY SUITE 610 SAN ANTONIO, TX 78216			Chief Financial Officer					
Signatures								
/s/ Robert L. R. Munden, Power of Attorney		04/18/2	2016					
**Signature of Reporting Person		Date	e					

## **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) These shares were withheld from a previously reported grant of restricted stock made pursuant to the Harte-Hanks, Inc. 2013 Omnibus Incentive Plan in order to pay applicable withholding taxes upon vesting.
- (2) These shares of restricted stock were issued pursuant to the Harte-Hanks, Inc. 2013 Omnibus Incentive Plan and vest in three equal installments on the first through third anniversaries of the grant date.

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.