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HARTE CHI	RISTOPHER M										
Form 4											
November 28	3, 2017										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	OMB APPROVAL		
	CONIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287	
Check this box if no longer								Expires:	January 31,		
subject to	CHANGE	GES IN BENEFICIAL OWNERSHIP O				NERSHIP OF	Estimated a	2005			
Section 1	6.	SECURITIES							burden hours per		
Form 4 or Form 5								response	0.5		
obligation	1 0						•	e Act of 1934,			
may cont				•	.			1935 or Section	n		
See Instru	iction	50(II) 0I	f the Inves	siment	Company	Act	01 194	0			
1(b).											
(Print or Type F	Responses)										
	ddress of Reporting		2. Issuer Na	ame and '	Ticker or T	rading	g	5. Relationship of	Reporting Person(s) to		
HARTE CH	RISTOPHER M	1 s	Symbol	-			Issuer				
HARTE				E HANKS INC [HHS]				(Check all applicable)			
(Last)	(First)	(Middle) 3	. Date of Ear	rliest Tra	nsaction			(Chee)	k all applicable)	
(Month/D			Month/Day/	n/Day/Year)			_X_ Director		Owner		
			1/27/2017	.017			Officer (give below)	title Othe below)	er (specify		
FREEWAY	, SUITE 610							below)	0010W)		
			. If Amendm	ndment, Date Original			6. Individual or Joint/Group Filing(Check				
			Filed(Month/D	onth/Day/Year)				Applicable Line)			
_X_Form filed by C						One Reporting Person lore than One Reporting					
SAN ANTO	ONIO, TX 78216)						Person		porting	
(City)	(State)	(Zip)	Table I -	- Non-De	erivative S	ecurit	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da	te 2A. Deeme	ed 3.		4. Securiti	es Ac	quired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year) Execution I		Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities	Form: Direct		
(Instr. 3)		any (Month/Day						-		Beneficial Ownership	
		(Monul/Da	.y/1eal) (II	nstr. 8)				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported	(,		
						(A) or		Transaction(s)			
			Co	ode V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	11/27/2017		,	А	13,084	А	\$	256,099	D		
Stock					(1)		1.07				

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.

 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)	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
HARTE CHRISTOPHER M 9601 MCALLISTER FREEWAY SUITE 610 SAN ANTONIO, TX 78216	Х						
Signatures							
/s/ Robert L. R. Munden, Power of Attorney		11/28/2	2017				
**Signature of Reporting Person		Dat	e				
- I II (B							

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).
- These shares were granted pursuant to the Harte-Hanks, Inc. 2013 Omnibus Incentive Plan in accordance with a pre-established election made by the reporting person to receive shares of common stock in lieu of a portion of the reporting person's director fees. The number of shares granted is based on the closing stock price on the last trading day of the preceding fiscal quarter.

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.