Edgar Filing: Alvarado Carlos M - Form 4

Alvarado Car	los M											
Form 4												
April 17, 201	8											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
CUNIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box									Expires:	January 31,		
subject to STATEMENT OF CHANGES IN BENEFICIA					CIA	LOW	NERSHIP OF		· 2005 ed average			
Section 16	5.	SECURITIES							burden hours per			
Form 4 or						_			response	0.5		
Form 5 obligation							-	ge Act of 1934,				
may conti				•	•	- •		f 1935 or Sectio	on			
See Instru	ction	30(h)	of the Inv	vestment (Company	y Act	of 19	40				
1(b).												
(Print or Type R	esponses)											
1. Name and Address of Reporting Person [*] Alvarado Carlos M							5. Relationship of Issuer	of Reporting Person(s) to				
Alvarado Ca	-	Symbol HARTE HANKS INC [HHS]										
	HARIE					(Check all applicable)						
(Last)	(First)	(Middle)		Earliest Tra	insaction							
				Month/Day/Year)				Director 10% Owner X_ Officer (give title Other (specify				
9601 MCALLISTER 04 FREEWAY, SUITE 610			04/15/20	04/15/2018				below) below)				
TREE WAT,	50112 010							Vice Pres	sident and Cont	roller		
			4. If Amen	. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check				
			Filed(Mont					Applicable Line) _X_ Form filed by One Reporting Person				
	NIC TV 7021								One Reporting Po More than One Ro			
SAN ANTO	NIO, TX 7821	10						Person				
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	lecuri	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of	2. Transaction I			3.	4. Securi			5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Ye	ar) Execution	on Date, if	n Date, if TransactionAcquired (A) or Code Disposed of (D)				Securities Beneficially		Indirect Beneficial		
(Month/Day/			/Day/Year)					Owned		Ownership		
			•					Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
Comment				Code V	Amount	(D)	Price	(
Common Stock	04/15/2018			F	114 (1)	D	\$ 9.6	1,115 <u>(2)</u>	D			
Stock							9.0					

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Unde Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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							
	Director	10% Owner	Officer	Other				
Alvarado Carlos M 9601 MCALLISTER FREEWAY SUITE 610 SAN ANTONIO, TX 78216			Vice President and Controller					
Signatures								
/s/ Robert L. R. Munden, Power of Attorney		04/17/2018						
**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) 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) All share amounts reflect adjustment for the issuer's 1-for-10 reverse stock split effective January 31, 2018.

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.