FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average I | burden | | | | | | | |

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>HAWTHORNE NANCY</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol CRA INTERNATIONAL, INC. [CRAI] | | | | | | | | | heck all a | onship of Reporting Pe all applicable) Director | | on(s) to Is | | |
|---|--|----|------------------|---|---|--|--|-----------------------|--|--|---|----------|----------------------|--|---|--|--|--|------------|
| (Last) (First) (Middle) 200 CLARENDON STREET | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/10/2014 | | | | | | | | | Off | icer (give title ow) | | Other (specify below) | | |
| (Street) BOSTON (City) | | |)2116 Zip) | | 4. If | Ame | ndment | Date o | f Original | Filed | (Month/Da | ay/Year |) | 6. Lir | ne) X Fo Fo | or Joint/Group rm filed by On rm filed by Mo rson | e Repor | ting Pers | on |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Execution Date, | | Transaction Disposed Of (I Code (Instr. 5) | | | es Acquired (A) o Of (D) (Instr. 3, 4 a | | | d Secu Ben Own | nount of irities eficially ed Following | Form: | Indirect | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A (C |) or)) | Price | Tran | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) |
| Common Stock 12/ | | | | 12/10 | /2014 | | A | | 2,507 | (1) A S | | \$0.0 | 00 | 2,507 | | D | | | |
| | | Та | ble II - D | | | | | | | | sed of, onvertib | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | Date, y/Year) | 4. Transaction Code (Instr. 8) | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiratio (Month/D | Date Expiration Expiration Date Month/Day/Year) Date Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | ount | 8. Price o Derivative Security (Instr. 5) | | Ov Fo Dii or (I) | vnership rm: ect (D) Indirect (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. The shares vest in four equal annual installments beginning on the first anniversary of the date of grant.

<u>Delia J. Makhlouta, by power of attorney</u>

12/11/2014

** 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.