SEC Form 4	
------------	--

 $\square$ 

I

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

# OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

1 0	n*	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>CRA INTERNATIONAL, INC.</u> [ CRAI ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 07/22/2015		Officer (give title below)	Other (specify below)		
ON STREET, T-32	2						
		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi Line)	idual or Joint/Group Filing	(Check Applicable		
MA	02116		X	Form filed by One Repo	orting Person		
	02110			,	One Reporting		
(State)	(Zip)						
	WILLIAM T (First) ON STREET, T-32 MA	(First) (Middle) ON STREET, T-32 MA 02116	WILLIAM T       CRA INTERNATIONAL, INC. [ CRAI ]         (First)       (Middle)         ON STREET, T-32       3. Date of Earliest Transaction (Month/Day/Year)         MA       02116	WILLIAM T       CRA INTERNATIONAL, INC. [ CRAI ]       (Check X         (First)       (Middle)       07/22/2015       07/22/2015         MA       02116       4. If Amendment, Date of Original Filed (Month/Day/Year)       6. Indiv	WILLIAM T       CRA INTERNATIONAL, INC. [ CRAI ]       (Check all applicable)         (First)       (Middle)         ON STREET, T-32       3. Date of Earliest Transaction (Month/Day/Year)       Officer (give title below)         MA       02116       4. If Amendment, Date of Original Filed (Month/Day/Year)       6. Individual or Joint/Group Filing Line)         X       Form filed by One Report         Form filed by More thar Person		

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)					Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock	07/22/2015		Α		<b>3,172</b> <sup>(1)</sup>	Α	\$0.00	28,167	D	

# 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v			Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

Explanation of Responses:

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

### Delia J. Makhlouta, by power of attorney

07/24/2015

\*\* 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.