Edgar Filing: Hill International, Inc. - Form 4

Hill Internat Form 4 April 08, 20											
CUNIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								3235-0287			
Check th if no lon	aer.	box									
subject to Section 7 Form 4 c	$\mathbf{S}_{\mathbf{A}} = \mathbf{S}_{\mathbf{A}} = $	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type Responses)											
1. Name and A Ajdler Arna	Address of Reporting Person <u>*</u> uud	Symbol	•				5. Relationship of Reporting Person(s) to Issuer				
		Hill Internationa		INJ		(Check all applicable)					
	(First) (Middle) NTERNATIONAL, IPPINCOTT CENTRE	3. Date of Earliest T (Month/Day/Year) 04/04/2008					X_ Director 10% Owner Officer (give title Other (specify below) below)				
	(Street)	4. If Amendment, D Filed(Month/Day/Yea	Amendment, Date Original d(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
MARLTON	I, NJ 08053						_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State) (Zip)	Table I - Non-	Derivative	Secui	ities Acq	uired, Disposed of	, or Beneficial	ly Owned			
1.Title of Security (Instr. 3)	any		4. Securi or(A) or Di (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial			
		Code V	Amount	(D)	Price	(IIIsu: 5 and 4)					
common stock	04/04/2008	S	400 <u>(1)</u>	D	\$ 13.25	50,200	D				
common stock	04/04/2008	S	5,000 (1)	D	\$13	45,200	D				
common stock	04/07/2008	S	100 (1)	D	\$ 13.25	45,100	D				
common stock	04/08/2008	S	4,500 (1)	D	\$ 13.25	40,600	D				
common stock	04/08/2008	S	5,000 (1)	D	\$ 13.5	35,600 <u>(2)</u>	D				

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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	2.	3. Transaction Date		4.	5.	6. Date Exer	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	onNumber	Expiration D	ate	Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
					Exercisable	Date		Number			
				C 1 1	(J.) (D.)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships							
		Director 10% Owner		Officer	Other				
Ajdler Arnaud C/O HILL INTERNATIONAJ 303 LIPPINCOTT CENTRE MARLTON, NJ 08053	L, INC.	X							
Signatures									
/s/ Arnaud 0 Ajdler 0	4/08/2008	3							

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

- ** 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 sold pursuant to the Reporting Person's 10b5-1 Plan.
- (2) Does not include 10,000 shares that the Reporting Person may acquire upon exercise of options previously reported.

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.

**Signature of

Reporting Person