## Edgar Filing: Kucinski Thomas S. - Form 4

Kucinski The Form 4	omas S.												
August 02, 2	018												
FORM			CECUD	TTIEC		ID EVO	TT 4 N		COMMISSION	OMB APPROVAL			
	UNITED	SIAIES				D EXC D.C. 205		IGE (	201911911551019	OMB Number:	3235-0287		
Check this box if no longer										Expires:	January 31, 2005		
subject to Section 1 Form 4 or	CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated average burden hours per response 0.5						
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17(a	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									0.0		
(Print or Type F	Responses)												
Kucinski Thomas S. Symbolic (Last) (First) (Middle) 3. Dat (Mont 2187 ATLANTIC ST 08/01			2. Issuer Symbol	Name <b>ar</b>	nd T	Ticker or T	rading	g	5. Relationship of Reporting Person(s) to Issuer				
			Information Services Group Inc. [III]					(Chec	(Check all applicable)				
			(Month/D	Date of Earliest Transaction Month/Day/Year) 8/01/2018 If Amendment, Date Original					Director 10% Owner XOfficer (give titleOther (specify below) below) EVP, Chief HR				
			4. If Amer						6. Individual or Joint/Group Filing(Check				
				nth/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
STANIFURI	D, C1 00902								Person				
(City)	(State)	(Zip)	Table	e I - Non	De	rivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	any		med on Date, if Day/Year)	<ul> <li>3. 4. Securities Acquired Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5)</li> </ul>			of	Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
Shares of				Code	V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Stock	08/01/2018			A <u>(1)</u>		24,570	А	\$0	179,007 (2)	D			

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day, e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and unt of rlying rities r. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	7 (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				
Kucinski Thomas S. 2187 ATLANTIC ST STAMFORD, CT 06902			EVP, Chief HR					
Signatures								
David E. Berger, as attorney-in-fact		08/02/2018						
**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).

Represents restricted stock units granted to the reporting person pursuant to the Information Services Group, Inc. Amended and Restated(1) 2007 Equity and Incentive Award Plan, which will vest in 4 equal installments on each of the first, second, third and fourth anniversaries of August 1, 2018.

(2) Includes 204 shares acquired under the Information Services Group, Inc. Amended and Restated 2007 Employee Stock Purchase Plan.

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.