Information Services Group Inc.

Form 4

December 17, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

0.5

January 31, Expires: 2005

OMB APPROVAL

response...

Estimated average burden hours per

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and A WAITE DO	Person * 2. Issuer Symbol	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer				
	Informa	Information Services Group Inc. [III]				(Check all applicable)				
(Last)	(First) (M	fiddle) 3. Date of	f Earliest Tr	ansaction		`	• • • • • • • • • • • • • • • • • • • •			
		(Month/D	(Month/Day/Year)			_X_ Director	10%	6 Owner		
TWO STAN	281 12/15/2	12/15/2015					er (specify			
TRESSER I						below)				
	4. If Ame	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
		Filed(Month/Day/Year)				Applicable Line)				
		`					_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
STAMFOR	D, CT 06901									
(City)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securit	ties Acquired	5. Amount of	6. Ownership	7. Nature of		
Security	Execution Date, if	on Date, if Transaction(A) or Disposed of			Securities	Form: Direct	Indirect			
(Instr. 3)		any	Code (D)			Beneficially	(D) or	Beneficial		
		(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and 5)	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
						Reported	(IIISII. 4)	(IIIsu. 4)		
					(A)	Transaction(s)				
			Code V	Amount	or (D) Price	(Instr. 3 and 4)				
Shares of					Φ Λ					
Common	12/15/2015		A(1)	31,977	A $\frac{\$ 0}{(1)}$	313,990	D			
Stock										

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title a	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amount	of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	Year)	Underlyi	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3 and 4)	and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								٨	mount		
								01			
						Date Exercisable	Expiration Date		umber		
								of			
				Code V	(A) (D)				hares		

Reporting Owners

Relationships Reporting Owner Name / Address Director 10% Owner Officer Other WAITE DONALD C III TWO STAMFORD PLAZA X 281 TRESSER BOULEVARD STAMFORD, CT 06901

Signatures

David E. Berger, as Attorney-in-Fact

12/17/2015

**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).
- Grant of restricted stock units which vest in 3 equal installments on each of the first, second and third anniversaries of December 15, 2015 (or earlier in the event of a change of control of ISG or such director's death or disability).

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.

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