FTI CONSULTING INC

Form 4

October 20, 2010

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

Expires:

3235-0287

January 31, 2005

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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).

Common

Stock

10/18/2010

(Print or Type Responses)

may continue.

See Instruction

| SHAUGHNESSY DENNIS J | | | 2. Issuer Name and Ticker or Trading Symbol FTI CONSULTING INC [FCN] | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
|----------------------|---------------------|-------------|--|-------------|--------------------------|--|------------------|--------------|--|
| | | | | | | (Check all applicable) | | | |
| (Last) | (First) | Middle) 3 | 3. Date of | Earliest Tr | ansaction | | | | |
| | | (1 | Month/Da | ay/Year) | | _X_ Director | 10% | | |
| 777 SOUTH FLAGLER | | | 10/18/2010 | | | _X_ Officer (give title Other (specify below) | | | |
| DRIVE, SU | JITE 1500 | | | | | | nan of the Boar | d | |
| (Street) | | | 4. If Amendment, Date Original | | | 6. Individual or Joint/Group Filing(Check | | | |
| | | F | Filed(Mon | th/Day/Year | | Applicable Line) _X_ Form filed by 0 | | | |
| WEST PA | LM BEACH, FL | 33401 | | | | Form filed by M Person | fore than One Re | porting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative Securities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of | 2. Transaction Date | e 2A. Deeme | ed | 3. | 4. Securities Acquired | 5. Amount of | 6. Ownership | 7. Nature of | |
| Security | (Month/Day/Year) | Execution I | Date, if | Transactio | on(A) or Disposed of (D) | Securities | Form: Direct | Indirect | |
| (Instr. 3) | | any | | Code | (Instr. 3, 4 and 5) | Beneficially | (D) or | Beneficial | |
| | | (Month/Day | y/Year) | (Instr. 8) | | Owned | Indirect (I) | Ownership | |
| | | | | | | Following | (Instr. 4) | (Instr. 4) | |
| | | | | | (A) | Reported | | | |
| | | | | | (11) | Transaction(s) | | | |

Code V Amount

6,081

F

(D)

D

Price

35.36

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.

(Instr. 3 and 4)

D

199,165

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 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. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) | | ate | 7. Title Amoun Underly Securiti (Instr. 3 | t of ying es | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr |
|---|---|--------------------------------------|---|--|---|---------------------|--------------------|---|--|---|--|
| | | | | Code V | (Instr. 3, 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Title N | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|-----------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| SHAUGHNESSY DENNIS J 777 SOUTH FLAGLER DRIVE SUITE 1500 WEST PALM BEACH, FL 33401 | X | | Chairman of the Board | | | | |

Signatures

By: Eric B. Miller, Attorney-in-Fact For: Dennis J.
Shaughnessy

10/20/2010

**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).

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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