FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	Check this box if no longer subject to								
ì	Section 16. Form 4 or Form 5								
J	obligations may continue. See								
	Instruction 1(b)								

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person*							2. Issuer Name and Ticker or Trading Symbol FTI CONSULTING INC [FCN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Linton Paul Alderman</u>							TIT GOTTO DITTO ITTO [TOT]									I	Director		10% C	wner		
																	Officer (give title		Other (specify			
							3. Date of Earliest Transaction (Month/Day/Year)										pelow)	-	below)			
555 12TH STREET NW					03/13/2019											Chief Strategy	y/Trans	t. Offic	er			
SSS 12111 STREET TVV																						
(Ctroot)						4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) WASHINGTON DC 20004													X Form filed by One Reporting Person									
WASHIN	GIUN	ON DC 20004		.0004													,	J				
																-orm filed by Mo Person	m filed by More than One Reporting					
(City)	(City) (State) (Zip)																					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of Security (Instr. 3) 2. Transact								2A. Deer		3. 4. Securities Acquired (A)							Amount of		Ownership	7. Nature		
Dat						Date (Month/Day/Year)			Execution Date, if any		Transaction Disposed Of (D) (Instruction Code (Instr. 5)			(Instr.	3, 4 a		ecurities eneficially		orm: Direct) or Indirect	of Indirect Beneficial		
					(Working)		(Month/Day/Year						0	wned Following		(Instr. 4)	Ownership					
										Code	v	Amount	1	(A) or		T-	eported ansaction(s)			(Instr. 4)		
							Code	\ <u>'</u>	Amount	(D)	Price	į (li	nstr. 3 and 4)								
Common Stock 03/13/								2019		A		2,980	(1) A		\$	0	26,861)			
			Ta	ble II - C	erivati	ve S	ecu	rities	Acau	ired. D	ispo	sed of.	or B	enefi	ciall	v Owr	ed					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																						
1. Title of	2.		3. Transaction	3A. Deeme	ed 4	4.		5. Numb		6. Date Exercisable and			7. Title and			8. Price	of 9. Number	of 10.	10.	11. Nature		
Derivative	Conversi	on 🗀	Date (Month/Day/Year)	Execution		Transa		tion of		Expiration Date Amount of (Month/Day/Year) Securities Underlying						Derivat			Ownership Form: Direct (D)	of Indirect Beneficial		
Security (Instr. 3)	or Exerci Price of	se		if any (Month/Day/Y		Code (8)	ınsır.									Securit (Instr. 5				Ownership		
	Derivativ	e							Acquired		D				otr 2		Owned		or Indirect	(Instr. 4)		
Security							(A) or Disposed		Security (Instr and 4)				su. s		Reported		(I) (Instr. 4)					
						of (D) (Instr. 3, 4								Transaction (Instr. 4)	ı(s)							
						and 5)									(
											Amount											
														or	nber							
						l		Date		Expiration	l	of										
					Code	v	(A)	(D)	Exercisa	ble I	Date Ti		Sha	Shares								

Explanation of Responses:

1. Restricted stock award that vests as follows: 33.33% on the first anniversary of the grant date, 33.33% on the second anniversary of the grant date and 33.34% on the third anniversary of the grant date.

Remarks:

By: Joanne Catanese,
Attorney-in-Fact For: Paul 03/15/2019

Linton

** 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.