FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STAT	ГЕМІ	ENT	OF	CHA	١NG	E

S IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 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

1. Name and Address of Reporting Person* Carlile Roger D						2. Issuer Name and Ticker or Trading Symbol FTI CONSULTING INC FCN								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Carme	<u>Kuger D</u>													Direct			10% Ow	-	
														X Office below	r (give title)		Other (s below)	респу	
(Last)	•	(First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 12/18/2013								EVP & Chief Financial Officer				
777 SOL	JTH FLAG	LER DRIVE			12	/18/20	J13												
SUITE 1	.500																		
(Street)					⁻ 4.	If Amer	ndme	nt, Date	of Origin	nal Fil	ed (Month/Da	ıy/Year)			Joint/Group	Filing	(Check App	olicable	
WEST P.	ΔΙΜ												Line	•	filed by One	Deno	rtina Dercor	,	
BEACH	H H	L	33401												orm filed by One Reporting Person orm filed by More than One Reporting				
					_									Perso		e man	One Repor	urig	
(City)	(S	State)	(Zip)																
		Tak	le I - N	Non-Deri	ivativ	e Sec	curit	ties Ac	quire	d, D	isposed o	f, or Be	neficial	y Owned	t				
1. Title of Security (Instr. 3) 2. Transacti		tion							Acquired (A) or						7. Nature of Indirect Beneficial				
Date (Month/Day/			v/Year)	Execution Date, (ear) if any		Date,	Transaction Disposed Of Code (Instr.		(D) (Instr. 3, 4 and 5)		Securities Beneficially		Form: Direct (D) or Indirect						
			`	, ,	(Month/Day/Year		y/Year)	8)				Owned Following Reported		(I) (Instr. 4)	Ownership (Instr. 4)				
									Code	v	Amount	(A) or (D)	Price	Transa (Instr. 3	ction(s)		- 1	su. 4)	
Common Stock 12/18/202			2013				M		11,848	A	\$27.89	_	4,301		D				
Common Stock 12/18/201			2013	13		S	\dashv	11,848	D	\$41.5166		2,453		D					
						/e Securities Acquired, Disposed of, or Beneficially Owned													
			Table I								posed of, , convertil			Owned					
1. Title of 2. 3. Transaction 3A. Deemed 4.									6. Date Exercisable and 7. Title and A				8. Price of			10.	11. Nature		
Security or Exercise (Month/Day/Year) if an			if any	ion Date,		ransaction ode (Instr.		Derivative		Expiration Date of Securities (Month/Day/Year) Underlying			ng	Derivative Security	derivative Securities		Ownership Form:	of Indirect Beneficial	
(Instr. 3) Price of (Mon				Month/Day/Year) 8)		Acquired (A) or Disposed of (D) (Instr.							e Security and 4)	(Instr. 5)	Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)	
	or	(msa. s and 4)						,		Following Reported		(I) (Instr. 4)	(
								of (D) (Instr.							Transaction(s)	on(s))		
						\longrightarrow		3, 4 and 5)				ļ .			(Instr. 4)				
													Amount or						
									Date		Expiration		Number of						
					Code	v	(A)	(D)	Exerci	sable	Date	Title	Shares						
Employee Stock																			
Option (right to	\$27.89	12/18/2013			M			11,848	01/02/	2008	01/02/2017	Common Stock	11,848	\$0.0	38,152	2	D		

Explanation of Responses:

1. On December 18, 2013, Mr. Carlile sold an aggregate of 11,848 shares of FTI Consulting, Inc. common stock. For reporting purposes, the sales prices within a \$1 range have been aggregated and the weighted average sales price has been reported. The price ranges were: \$41.50 to \$41.63. The Company maintains a record of the transactions and copies will be provided upon request.

By: Eric B. Miller, Attorney-in-Fact For: Roger D. Carlile ** 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.