

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

OMB APPROVAL	
OMB Number:	3235-0104
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1. Name and Address of Reporting Person* <u>Jones Nicole S</u> <hr/> (Last) (First) (Middle) 555 12TH STREET NW <hr/> (Street) WASHINGTON DC 20004 <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 03/22/2022	3. Issuer Name and Ticker or Trading Symbol <u>FTI CONSULTING, INC [FCN]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) <hr/> 6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

Explanation of Responses:

Remarks:

No securities are beneficially owned.

By: [Joanne Catanese, Attorney-in-Fact](#) [03/24/2022](#)
 For: [Nicole S. Jones](#)

** 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 5 (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.

POWER OF ATTORNEY

Know all by these presents, that the undersigned, Nicole S. Jones, hereby makes, constitutes and appoints each of Curtis P. Lu and Joanne F. C.

- (1) prepare, execute, acknowledge, deliver and file any and all Forms 3, Forms 4, and Forms 5 (including any amendments thereto), with the
- (2) seek or obtain, as the undersigned's representative and on the undersigned's behalf, information on transactions in the Company's secur:
- (3) do and perform any and all other acts which in the discretion of such attorney-in-fact are necessary or desirable for and on behalf of :

The undersigned acknowledges that:

- (1) this Power of Attorney authorizes, but does not require, each such attorney-in -fact to act in his or her discretion on information pro
- (2) neither the Company nor either of such attorneys-in-fact assumes (i) any liability for the undersigned's responsibility to comply with :

The undersigned hereby grants to such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requi:

The undersigned also agrees to indemnify and hold harmless the Company and each attorney-in-fact against any losses, claims, damages, or liabi:

The validity of this Power of Attorney shall not be affected in any manner by reason of the execution, at any time, of other powers of attorne:

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of March 22, 2022.

By: /s/ Nicole S. Jones
Print Name: Nicole S. Jones

STATE OF CT
COUNTY OF Hartford

On this 21st day of March, 2022, Nicole Jones personally appeared before me, and acknowledged that s/he executed the foregoing instrument for :

IN WITNESS WHEREOF, have hereunto set my hand and official seal.

By: /s/ Alec Steinfeldt

Notary Public
My Commission Expires: 02/28/2026

Alec Steinfeldt
Notary Public State of Connecticut
My Commission Expires 02/28/2026