FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								
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0.5

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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

					UI S	Section	11 30(11)	or the r	iivesiiiiei	it Con	ipariy Act t	01 194	0								
1. Name and Address of Reporting Person* Ellis Vernon James				2. Issuer Name <b>and</b> Ticker or Trading Symbol FTI CONSULTING INC [FCN]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Ellis Vernon James				I										X	Direct	tor		10% O	wner		
(Last) 1101 K S7	`	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/03/2015											Officer (give title below)			Other (specify below)		
					4. If	Ame	ndment,	, Date o	f Original	Filed	(Month/Da	ay/Yea	r)		6. Individual or Joint/Group Filing (Check Application)						
(Street) WASHING	GTON D	C 2	20005												,	Form filed by One Reporting Person  Form filed by More than One Reporting					
(City)	(Si	tate) (	Zip)													Perso		re tna	n One Repo	orting	
		Tabl	e I - Nor	n-Deriva	ative	Sec	curitie	s Acc	quired,	Dis	osed o	f, or	Ben	eficia	ally O	wne	d				
Date			Date	th/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3,			nd S B C	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(	A) or D)	Price	,  т	Reported Transaction(s) (Instr. 3 and 4)			(111511.4)		
Restricted	Stock Uni	ts		06/03/	/2015	5			A		6,178(	(1)	A	\$0	.0	6	,178	B D			
		Та	ble II - D								sed of, onvertib				y Owi	ned					
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		of		6. Date E Expiratio (Month/D	n Date	•	7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		nstr. 3				Own Forn Dire or In (I) (II	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
- 1								ıl					Am	ount							

Date Exercisable

## Explanation of Responses:

1. Restricted Stock Units will vest in full on the first anniversary of the date of grant.

By: Joanne Cantanese,

Number

of Shares

Attorney in Fact For: Vernon 06/05/2015

<u>Ellis</u>

Title

Expiration

\*\* 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).

Code

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.

(A) (D)