| SEC | Form | 4 |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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: | 3235-0287 | | | | | | |
| Estimated average | burden | | | | | | |

Estimated average burden hours per response: 0.5

| | ss of Reporting Persor ard E |)* | 2. Issuer Name and Ticker or Trading Symbol <u>FTI CONSULTING INC</u> [FCN] | (Check | ionship of Reporting Pera all applicable) | . , |
|--|--|--------|--|-------------------------|---|---------------------------------------|
| (Last) | 77 SOUTH FLAGLER DRIVE UITE 1500 reet) | | 3. Date of Earliest Transaction (Month/Day/Year) 06/16/2009 | X | Director Officer (give title below) | 10% Owner Other (specify below) |
| (Street) WEST PALM BEACH (City) (State) (Zip) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indivi Line) X | g (Check Applicable orting Person n One Reporting | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 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 | Transaction(s) (Instr. 3 and 4) | | (11511. 4) |
| Common Stock | 06/16/2009 | | М | | 600 | A | \$16.8 | 600 | D | |
| Common Stock | 06/16/2009 | | S | | 600 | D | \$54.255 | 0 | D | |
| Common Stock | 06/16/2009 | | М | | 1,700 | A | \$16.8 | 1,700 | D | |
| Common Stock | 06/16/2009 | | S | | 1,700 | D | \$54.0176 | 0 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | (3, part, tan, the area of th | | | | | | | | | | | | | | |
|---|---|--|---|------------------------------|---|--|-------------------------|-------------------------------------|--------------------|--|--|---|--|--|--|
| 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. Transa Code (8) | | of Deri Sec Acq (A) Disp of (I | oosed D) tr. 3, 4 | Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Non- Qualified Stock Option (right to buy) | \$16.8 | 06/16/2009 | | М | | | 600 | 06/07/2005 ⁽¹⁾ | 06/07/2014 | Common Stock | 600 | \$0 | 109,400 | D | |
| Non- Qualified Stock Option (right to buy) | \$16.8 | 06/16/2009 | | м | | | 1,700 | 06/07/2005 ⁽¹⁾ | 06/07/2014 | Common Stock | 1,700 | \$0 | 107,700 | D | |

Explanation of Responses:

1. Option vests in three equal annual installments beginning one year after the grant date.

By: Eric B. Miller, Attorny-in-Fact For: Gerard E. Holthaus 0

06/17/2009

** 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.