FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL							
OMB Number:	3235-0287							
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*  Nickles Elizabeth A						2. Issuer Name and Ticker or Trading Symbol FTI CONSULTING INC [ FCN ]									Check	all app Direc	licable)	g Person(s) to I	
(Last) (First) (Middle) 777 SOUTH FLAGLER DRIVE SUITE 1500					3. Date of Earliest Transaction (Month/Day/Year) 01/01/2012										X	belov			)
(Street) WEST PALM BEACH FL 33401 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
		Tabl	e I - Nor	n-Deriva	ative	Se	curitie	s Acc	quired,	Dis	posed o	of, o	r Ben	efici	ally (	Owne	ed		
1. Title of Security (Instr. 3)  2. Trans Date (Month//					Ex n/Day/Year) if a		2A. Deemed Execution Date, f any Month/Day/Year)		Transaction Disposed Code (Instr. 5)			ities Acquired (A) d Of (D) (Instr. 3, 4			4 and Sea Be Ow		ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Price	.		iction(s) 3 and 4)		(Instr. 4)
Common Stock 01/01/						./2012					223		D	\$43.04		]	1,777	D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any			Date,	4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Pri Deriv Secu (Instr	ative deri rity Sec . 5) Ben Own Foll Rep Trai	9. Number or derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
		Code		Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nur of	ount mber ires						

Explanation of Responses:

By: Eric B. Miller, Attorney-

01/05/2012

Date

in-Fact For: Elizabeth A.

**Nickles** 

\*\* Signature of Reporting Person

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly.$ 

- $^{\star}$  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.