

Carlile Roger D  
Form 3  
January 07, 2009

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Carlile Roger D		(Month/Day/Year)	FTI CONSULTING INC [FCN]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
777 SOUTH FLAGLER DRIVE,Â SUITE 1500		01/05/2009	(Check all applicable)	
(Street)			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
WEST PALM BEACH,Â FLÂ 33401			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
(City)	(State)	(Zip)	(give title below)	(specify below)
			EVP and Chief HR Officer	
			6. Individual or Joint/Group Filing(Check Applicable Line)	
			<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> 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)
Common Stock	59,015	D	Â

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

SEC 1473 (7-02)

**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 control number.**

**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 of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Title			

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	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Deferred Restricted Stock Units	03/14/2008 <sup>(1)</sup>	Â <sup>(1)</sup>	Common Stock 1,274	\$ <sup>(1)</sup>	D	Â
Employee Stock Option (right to buy)	01/02/2008 <sup>(2)</sup>	01/02/2017	Common Stock 50,000	\$ 27.89	D	Â
Employee Stock Option (right to buy)	03/14/2009 <sup>(3)</sup>	03/14/2018	Common Stock 1,274	\$ 65.37	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Carlile Roger D 777 SOUTH FLAGLER DRIVE SUITE 1500 WEST PALM BEACH, FL 33401	Â	Â	Â EVP and Chief HR Officer	Â

## Signatures

Roger D Carlile 01/07/2009

\*\*Signature of Reporting Person

Date

## Explanation of Responses:

\* 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).

In his capacity as a senior managing director, Mr. Carlile participated in the FTI Consulting, Inc. Deferred Compensation Plan for Key Employees and Non-Employee Directors. As an executive officer, Mr. Carlile is no longer eligible to participate in that plan. The deferred

(1) stock units are immediately vested upon award. Each deferred stock unit represents the right to receive one share of common stock of FTI Consulting, Inc. upon the earlier of (i) January 1, 2010 (Mr. Carlile's elected payment date) and (ii) a termination event as defined in Section 409A of the Internal Revenue Code and the plan.

(2) Option vests in six equal installments on the first through sixth anniversaries of the date of grant.

(3) Option vests at the rate of 20% per annum on the first through fifth anniversaries of the date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.