#### Costamagna Claudio Form 3 June 08, 2012 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104 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 <u>*</u> Costamagna Claudio			2. Date of Event Requiring Statement (Month/Day/Year)	e 5. 155del 14di	3. Issuer Name and Ticker or Trading Symbol FTI CONSULTING INC [FCN]				
(Last)	(First)	(Middle)	06/06/2012		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
777 SOUTH SUITE 1500	-	R DRIVE		(Check	all applicable)	1			
	(Street)			X Director Officer (give title below	Other		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting		
WEST PALM BEACH, FL 33401					Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I	- Non-Derivat	Non-Derivative Securities Beneficially Owned				
1.Title of Secur (Instr. 4)	ity			nt of Securities lly Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	•		
Reminder: Report on a separate line for each class of securities bene owned directly or indirectly.			eficially S	EC 1473 (7-02	2)				
	inform require	ation conta ed to respo	oond to the collection lined in this form are nd unless the form di //B control number.	not					

#### 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	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I)	

Estimated average burden hours per

response...

0.5

(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Costamagna Claudio 777 SOUTH FLAGLER DRIVE SUITE 1500 WEST PALM BEACH, FL 33401	ÂX	Â	Â	Â	
Signatures					
/s/ Eric B. Miller, Attorney-inFact For: Claudio Costamagna		06/08/2012			
**Signature of Reporting Person		Date			

# **Explanation of Responses:**

## No securities are beneficially owned

\* 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).

## Â

### **Remarks:**

### No Securities Owned

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.