Edgar Filing: BURNISON GARY D - Form 4

BURNISON	GARY D										
Form 4											
June 30, 201	0										
FORM	4							OMB AF	PROVAL		
		SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					OMB Number:	3235-0287			
Check this box									Expires:	January 31,	
if no long subject to		EMENT O	F CHAN	IGES IN BENEFICIAL OWN				NERSHIP OF	Estimated average		
Section 1		SECURITIES					burden hours per				
Form 4 or								response	0.5		
Form 5 obligation		-					-	e Act of 1934,			
may cont				•	•	· ·		1935 or Section	1		
See Instru	uction	30(h)	of the In	vestment	Compan	iy Ac	t of 194	0			
1(b).											
(Print or Type F	Responses)										
DUDNICON CADY D				2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to			
								Issuer			
	KORN	KORN FERRY INTERNATIONAL				(Check all applicable)					
			[KFY]					(Check an applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction			X Director		Owner	
			(Month/D	(Month/Day/Year)				XOfficer (give titleOther (specify below)			
			06/28/20	5/28/2010				below)	CEO		
	IONAL, 190										
OF THE ST	ARS, SUITE	2600									
			4. If Ame	4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check			
			Filed(Mon					Applicable Line)			
LOS ANGELES, CA 90067								_X_Form filed by One Reporting Person Form filed by More than One Reporting			
LUS ANGE	LES, CA 900	107						Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of		Date 2A. Deer	3. 4. Securities Acquired				5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Y	ear) Executio any	n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)						Form: Direct Indirect (D) or Benefic	Indirect Beneficial	
(Insu: 5)		(Month/Day/Year)			(1150.5,	i unu	5)		· · ·	Ownership	
			•					Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				a		or		(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price	,			
Common Stock, par							\$				
value \$0.01	06/28/2010			F <u>(1)</u>	6,884	D	ф 14.77	388,130	D		
per share											
•											

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

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.

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 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

**Signature of Reporting Person

Reporting Owner Name / Address		Relationships					
	Director	10% Owner	Officer	Other			
BURNISON GARY D C/O KORN/FERRY INTERNATIONAL 1900 AVENUE OF THE STARS, SUITE 2600 LOS ANGELES, CA 90067	Х		CEO				
Signatures							
/s/ Peter L. Dunn, 06/30/20 attorney-in-fact	010						

Date

Explanation of Responses:

- * 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).
- (1) Represents a reduction in shares to satisfy the tax withholding obligations of the Issuer with respect to the vesting, on June 28, 2010, of 19,255 shares of restricted stock held by the Reporting Person.

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.