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KORN FERRY INTERNATIONAL

Form 4

September 24, 2008 FORM 4

| TORIVI 4 UNITED STATES SECURITIES AN | | | | | | | | | | 3235-0287 | | |
|--|---|----------------|----------------------------------|---|--------------------------------------|--|-------------|--|--|---|--|--|
| Check this if no long subject to Section 10 Form 4 or Form 5 obligation may conti See Instru 1(b). | this box onger to STATEMENT OF CHANGES IN 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 20(b) of the Investment Company Act of 1940 | | | | | | | | Number: Expires: Estimated a burden hou response | ırs per | | |
| (Print or Type R | esponses) | | | | | | | | | | | |
| You Harry L. Symbol KOR | | | Symbol | Name and FERRY IN | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| (M | | | | Earliest Tra ay/Year) 008 | insaction | | | _X_ Director 10% Owner Officer (give title Other (specify below) | | | | |
| | (Street) 4. If Amendment, Date Original 6. Filed(Month/Day/Year) A | | | | Applicable Line) _X_ Form filed by 0 | _X_ Form filed by One Reporting Person | | | | | | |
| LOS ANGE | LES, CA 9006 | 57 | | | | | | Form filed by N Person | More than One Re | eporting | | |
| (City) | (State) | (Zip) | Table | e I - Non-Do | erivative S | ecuri | ties Ac | quired, Disposed of | f, or Beneficial | lly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction I (Month/Day/Ye | ear) Execution | emed on Date, if Day/Year) | 3. Transaction Code (Instr. 8) | Disposed (Instr. 3, | (A) o of (D |) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common Stock, par value \$0.01 | 09/23/2008 | | | A | 3,560 | A | \$ 0 (2) | 11,719 | D | | | |

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

value \$0.01 per share (1)

> Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 | 2. Conversion | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4. Transacti | 5. orNumber | 6. Date Exerc Expiration D | | 7. Title Amount | | 8. Price of Derivative | 9. Nu Deriv |
|---------------------|------------------------|--|--------------------------------------|-------------------------------|-----------------|----------------|-------------------------------|--------------------|--|--|------------------------|---|
| Security (Instr. 3) | | or Exercise Price of Derivative Security | (| any (Month/Day/Year) | Code (Instr. 8) | of | (Month/Day/Year) e | | Underlying Securities (Instr. 3 and 4) | ying ies | Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title N | Amount or Number of Shares | | |

Reporting Owners

Relationships Reporting Owner Name / Address

10% Owner Officer Other Director

You Harry L. C/O KORN/FERRY INTERNATIONAL 1900 AVENUE OF THE STARS, SUITE 2600 LOS ANGELES, CA 90067

X

Signatures

/s/ Peter L. Dunn, 09/24/2008 attorney-in-fact

**Signature of Reporting Person

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).
- The restricted stock units vest in full on the day before the next annual meeting of the Issuer's stockholders that follows the grant date of September 23, 2008.
- (2) Granted as compensation for services as a director.

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.

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