FORM 4

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

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*  Nutt Jay A.						2. Issuer Name and Ticker or Trading Symbol FMC TECHNOLOGIES INC [FTI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Ivatioay A.				-										Direct	or		10% O	wner		
(Last)	(Fi	st) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 05/27/2011										Officer (give title below)		Other (specify below)		
1803 GEARS ROAD															Vice	Vice President and Controller				
1003 GE/IKS KO/ID					4 15 4															
(Street)	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									<ol><li>Individual or Joint/Group Filing (Check Applicable Line)</li></ol>									
HOUST	ON TY	v -	77067											3	·	filed by One	Rep	orting Perso	on	
HOUSTON TX 77067													Form filed by More than One Reporting							
(City)	(St	tate) (	Zip)												Perso	,		0 0 0	J9	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1 Title of	Security (Ins			2. Transac			Deemed		3.	·		rities Acq			_	1	6.0	wnership	7. Nature	
1. Tiue of	Security (ins	ur. 3)		Date		Execution Date,			Transact	Transaction Dispose					Securities		Form: Direct		of Indirect	
	ay/Year)	/Year) if any (Month/Day/Year)			Code (Instr. and 5)					Benefic Owned				Beneficial Ownership						
		(			) <del>"</del>						Following		(Instr. 4)		(Instr. 4)					
									Code	٧	Amoun	nt (A) or Pi		rice	Reported Transaction(s)					
									(D)				(Instr. 3 and 4)							
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
				(e.g., p	uts, ca	ılls,	warra	nts	, options	, co	onverti	ble sec	uritie	es)						
	2.	3. Transaction			4.				6. Date Exercisable and						3. Price	9. Number		10.	11. Nature	
					Transact Code (In				Expiration Date Amount of (Month/Day/Year) Securities					of Derivative		derivative Securities		Ownership Form:	of Indirect Beneficial	
(Instr. 3) Price of (Month/Day/Year) 8)							Securities			Underlying					Security	Beneficially		Direct (D)	Ownership	
	Derivative Security					Acquired Derivative (A) or Security (Inst									Instr. 5)	Owned Following		or Indirect (I) (Instr.	(Instr. 4)	
	,					Disposed and						and 4)	(	١.		Reported		4)		
			of (D) (Instr. 3, 4											Transaction(s) (Instr. 4)						
	and 5)																			
													Amo	unt						
													or Numl	oer						
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	of Share	es						
Phantom Stock Units	\$0.0000(1)	05/27/2011			A		105.15		(2)		(2)	Common Stock <sup>(3)</sup>	105.	.15	\$23.3	27,697.41	5	D		

## Explanation of Responses:

- 1. N/A
- 2. Phantom Stock Units are payable in cash following termination or retirement of the reporting person's employment with FMC Technologies, Inc., or death.
- 3. A participant's interest in the NQ Plan is represented in units (referred to as Phantom Stock Units) which consist of phantom shares of FMC Technologies, Inc. Common Stock and uninvested cash balances held by the NQ Plan for administrative convenience.

<u>Jeffrey Carr, Attorney-In-Fact</u> <u>05/31/2011</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.