FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
haura nar raananaa	0.5							

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

Name and Address of Reporting Person* SCHUMANN WILLIAM H					2. Issuer Name and Ticker or Trading Symbol FMC TECHNOLOGIES INC [FTI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) 200 EAS	`	rst) ((Middle)		3. Dat 10/27			est Transaction (Month/Day/Year)						>	below	er (give title v) and Chief Fina		Other (specify below)		
(Street) CHICAC			50601 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line) K Form Form	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)				.	Exe if a	A. Deemed execution Date, f any Month/Day/Year)		Transaction Disp			rities Ac ed Of (D)			Securit Benefit Owned	ties cially	Form (D) o Indir	n: Direct or ect (I)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amoun		(A) or (D)		Report Transa	Following Reported Transaction(s) (Instr. 3 and 4)		r. 4)	(Instr. 4)		
	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)	e of 2. 3. Transaction 3A. Deemed Execution Date, (Month/Day/Year) if any		Transaction Code (Instr. B)		of E		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		[] []	3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficial Ownership			
					Code	v	(A)	(D)	Date Exercisabl		piration	Title	Amo or Nun of Sha							
Phantom Stock Units	\$0.00 ⁽¹⁾	10/27/2003	10/27/	/2003	A		726.7		(2)		(2)	Common	0.0	0(3)	\$2.78 ⁽⁴⁾	52,640.43		D		
Phantom Stock Units	\$0.00 ⁽¹⁾	10/28/2003	10/28/	/2003	A		765.23		(5)		(5)	Commo	0.0	0(3)	\$2.64 ⁽⁴⁾	53,405.66		D		

Explanation of Responses:

- 1. N/A
- 2. Acquisition of Phantom Stock Units (in an exempt transaction) by the reporting person under the FMC Technologies, Inc. Non-Qualified Savings and Investment Plan (NQ Plan). 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.
- 4. Denotes Unit Price
- 5. Acquisition of Phantom Stock Units (in an exempt transaction) under the FMC Technologies, Inc. Non-Qualified Savings and Investment Plan (NQ Plan) resulting from matching contribution by issuer. Phantom Stock Units are payable in cash following termination or retirement of the reporting person's employment with FMC Technologies, Inc., or death.

By: James L. Marvin 10/29/2003

** Signature of Reporting Person Date

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

- * 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.