FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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 [*] CARR JEFFREY W					2. Issuer Name and Ticker or Trading Symbol <u>FMC TECHNOLOGIES INC</u> [FTI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) 1803 GE	Last) (First) (Middle) 803 GEARS ROAD				3. Date of Earliest Transaction (Month/Day/Year) 05/29/2007								X Office below	er (give title v)		(specify	
(Street) HOUSTON TX 77067 (City) (State) (Zip)				— 4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								ne) X Form Form	,			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3) Date (Month/Date)				action	ion 2A. Deemed Execution Date			3. Transacti Code (Ins	on D	4. Securities Acquired Disposed Of (D) (Instr. and 5)			or 5. Amo Securi Benefi Owned	ount of ties cially	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership	
							Code	V A	Amoun	t (A) (D)	or Price			(Instr. 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	4. Transac Code (II	tion	5. Number on of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number 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 Exercisable		ration	Title	Amount or Number of Shares	ber				
Phantom Stock Units	\$0 ⁽¹⁾	05/29/2007 ⁽²⁾	05/29/2007	A		139.58		(3)	(3	3)	Common Stock ⁽⁴⁾	139.58	\$10	45,368.28	3 D		
Phantom Stock Units	\$0 ⁽¹⁾	05/30/2007 ⁽⁵⁾	05/30/2007	A		137.66		(3)	(3	3)	Common Stock ⁽⁴⁾	137.66	\$10.14	45,505.94	+ 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. Phantom Stock Units are payable in cash following termination or retirement of the reporting person's employment with FMC Technologies, Inc., or death.

4. 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.

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.

Remarks:

By: James L. Marvin, attorney-in-fact

05/31/2007

** 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.