FORM 4

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

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	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*     Scott Mark J.						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)	(Fir	st) (N	Middle)	Y WEST		3. Date of Earliest Transaction (Month/Day/Year) 02/25/2016									X		er (give title	inistr	Other below)	(specify	
(Street) HOUSTO			7086 Zip)		4. If A	menc	dment,	, Date (	of Origina	d (Month/D	ay/Ye	ar)		Indivine)	idual 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. Transac Date (Month/Da					/Year) i	eemed Ition Date, h/Day/Year)		Transaction		4. Securities Acquired ( Disposed Of (D) (Instr. 3 and 5)				3, 4 Secu Bend Own		cially I	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A (E	A) or D)	Price		Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)		
Common	02/25/2016				A		16,006	5	A	\$23.86		88,543			D						
Common Stock					2/25/2016				A		13,271		A	\$23.86		101,814		D			
Common													4,235.4668			I	By Qualified 401(k) Plan				
	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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any					4. Transaction Code (Instr. 8)		vative rities vired rosed ) r. 3, 4	6. Date E Expiration (Month/I	n Da		7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)		J	of Deri Secu	Price erivative curity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	On For On (I) (4)	wnership orm: irect (D) r Indirect ) (Instr.	Beneficial Ownership	
					Code	v	(A)	(D)	Date I Exercisable I		Expiration Date	Title	of	mber ares							

**Explanation of Responses:** 

<u>Lisa P. Wang, Attorney-In-</u> <u>Fact</u>

02/29/2016

\*\* 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.