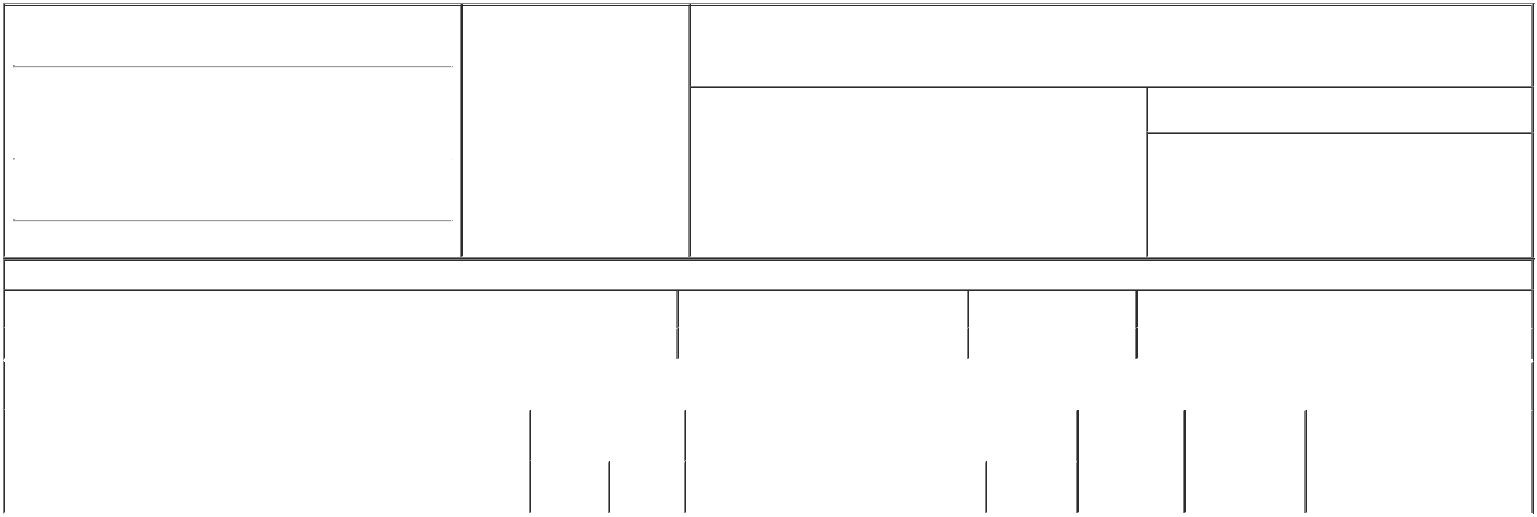
SEC Form 3

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FORM 3** | **UNITED STATES SECURITIES AND EXCHANGE COMMISSION** |  |  |  |  |  |
|  | Washington, D.C. 20549 |  |  |  |  |  |
|  |  | OMB APPROVAL |  |  |  |
|  |  |  |  |  |  |
|  | **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES** |  |  |  |  |  |
|  |  | OMB Number: | 3235-0104 |  |  |
|  |  |  |  |  |
|  |  |  | Estimated average burden |  |  |  |
|  | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |  | hours per response: | 0.5 |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |



or Section 30(h) of the Investment Company Act of 1940



1. Name and Address of Reporting Person\*

[Piou Olivier](http://www.sec.gov/cgi-bin/browse-edgar?action=getcompany&CIK=0001776231)

1. Date of Event Requiring Statement (Month/Day/Year)

06/01/2019

3. Issuer Name **and** Ticker or Trading Symbol

[TechnipFMC plc](http://www.sec.gov/cgi-bin/browse-edgar?action=getcompany&CIK=0001681459) [ FTI ]

|  |  |  |  |
| --- | --- | --- | --- |
|  | (Last) | (First) | (Middle) |
|  | C/O TECHNIPFMC PLC | |  |
|  | ONE ST. PAUL'S CHURCHYARD | |  |
|  |  |  |  |
| (Street) | |  |  |
|  | LONDON | X0 | EC4M 8AP |

1. Relationship of Reporting Person(s) to Issuer (Check all applicable)

X Director 10% Owner

Officer (give title below) Other (specify below)

1. If Amendment, Date of Original Filed (Month/Day/Year)
2. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person

Form filed by More than One Reporting Person

(City) (State) (Zip)

**Table I - Non-Derivative Securities Beneficially Owned**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1. Title of Security (Instr. 4)** |  |  | **2. Amount of Securities Beneficially Owned** | | **3. Ownership Form: Direct 4. Nature of Indirect Beneficial Ownership (Instr. 5)** | | | | | | | |  |
|  |  |  | **(Instr. 4)** | | **(D) or Indirect (I) (Instr. 5)** | | |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| No Securities are Beneficially Owned |  |  | 0 |  | D |  |  |  |  |  |  |  |  |
|  |  | | |  |  |  |  |  |  |  |  |  |  |
|  | **Table II - Derivative Securities Beneficially Owned** | | | |  |  |  |  |  |  |  |  |  |
|  | **(e.g., puts, calls, warrants, options, convertible securities)** | | | | |  |  |  |  |  |  |  |  |
|  |  | |  |  | |  |  |  |  |  |  |  |  |
| **1. Title of Derivative Security (Instr. 4)** | **2. Date Exercisable and** | | **3. Title and Amount of Securities Underlying Derivative Security** | | | **4. Conversion or** | | **5. Ownership** | | | **6. Nature of Indirect Beneficial** | |  |
|  | **Expiration Date** | | **(Instr. 4)** | |  | **Exercise Price** | | **Form: Direct (D) or** | | | **Ownership (Instr. 5)** | |  |
|  | **(Month/Day/Year)** | |  |  |  | **of Derivative** | | **Indirect (I) (Instr. 5)** | | |  |  |  |
|  |  |  |  |  |  | **Security** | |  |  |  |  |  |  |
|  |  |  |  |  | **Amount or** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **Date** | **Expiration** |  |  | **Number of** |  |  |  |  |  |  |  |  |
|  | **Exercisable** | **Date** | **Title** | | **Shares** |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Explanation of Responses:** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Remarks:** |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | /s/ Lisa P. Wang, Attorney-In-Fact | | |  |  | 06/03/2019 | |  |  |  |
|  |  |  |  | \*\* 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 5 (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.**

TechnipFMC plc

LIMITED POWER OF ATTORNEY

(For Executing Forms 3, 4 and 5)

Know all by these presents, that the undersigned hereby constitutes and appoints each of Dianne B. Ralston, Stephen Siegel, and Lisa P. Wang, signing singly, and wi

1. Execute for and on behalf of the undersigned, in the undersigned's capacity as an officer or director, or both, of TechnipFMC plc (the "Company"), Forms 3, 4
2. Do and perform any and all acts for and on behalf of the undersigned that may be necessary or desirable to complete and execute any such Form 3, 4 or 5, compl
3. Take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the bes The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary a This Limited Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4 or 5 with respect to the undersi IN WITNESS WHEREOF, the undersigned has caused this Limited Power of Attorney to be executed as of this 1st day of May 2019.

/s/Olivier Piou

Name: Olivier Piou