## 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

1. Name and Address of Reporting Person* NETHERLAND JOSEPH H						2. Issuer Name and Ticker or Trading Symbol <u>FMC TECHNOLOGIES INC</u> [FTI]									lationshi ck all app Direc	,	ng Pe	erson(s) to I 10% O	
(Last)	(Fi	rst) (		3. Date of Earliest Transaction (Month/Day/Year) 08/30/2005								Х	X Officer (give title below)			Other ( below)	specify		
1803 GE										CEO and President									
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)				
HOUSTON TX 77067															X Form filed by One Reporting Person				
(City)	(City) (State) (Zip)														Form Perso	filed by Mor on	re tha	in One Rep	orting
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) Date (Month/Day						Execution Date,			Transaction Di			Securities Acquired ( isposed Of (D) (Instr. : nd 5)			Securi Benefi Owned	ties Fo cially (D d In		wnership m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amoun	int (A) or P		rice	Repor Transa	Following Reported Transaction(s) (Instr. 3 and 4)		tr. 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)	if any (Month/Day/Year)		4. Transactior Code (Instr 8)		on of		6. Date Exe Expiration (Month/Day	Date		e and 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		o D S (I	Price f erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amou or Numi of Share	ber					
Phantom Stock Units	(1)	08/30/2005 <sup>(2)</sup>	08/30/2005		Α		740.39		(3)		(3)	Common Stock	0.00	(4)	\$5.21 <sup>(5)</sup>	40,489.00	6	D	

Explanation of Responses:

1. N/A

2. 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.

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. Denotes Unit Price

By: By: James L. Marvin

08/31/2005

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.