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* CARR JEFFREY W						2. Issuer Name and Ticker or Trading Symbol FMC TECHNOLOGIES INC [FTI]											p of Reporti blicable) tor	ng Pe	erson(s) to 1		
(Last) 1803 GE	(Fir	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/20/2007										belov	er (give title w) P and Ger	neral	below)	(specify)	
(Street) HOUSTON TX 77067 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indi ine) X	Form Form	ridual 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. Transa Date (Month/D						Execution Date			3. Transaction Code (Instr. 8)		4. Securities Acquired Disposed Of (D) (Instr. and 5)				3, 4 Secur Bene Owne		cially I	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership	
					Code	v	Amount		A) or D)	Pric	e	Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)					
Common	02/20/2	2007				A		6,290		Α	\$ <mark>0</mark>		47,372		D						
Common Stock					02/20/2007				A		5,000		A	\$0		52,372		D			
Common													6	5,577		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)	rative Conversion Date Execution rity or Exercise (Month/Day/Year) if any						ction of		6. Date Ex Expiration (Month/D	n Dat	Amo Secu Und Deri Secu		. Title and Amount of Securities Inderlying Derivative Security (Instr and 4)		of Der Sec	rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	y 1	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		xpiration Pate	Title	or Nui of	ount mber ires							

Explanation of Responses:

Remarks:

By: James L. Marvin, attorney-in-fact 02/22/2007

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

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.

^{**} Signature of Reporting Person Date

 $^{^{\}star}$ 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).