## 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 <sup>*</sup> MAMBU RONALD D						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 GI	(Fi EARS ROA	First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 05/01/2006								A be	icer (give title ow) ce President	Other below and Control	′	
(Street) HOUSTON TX 77067 (City) (State) (Zip)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								₋ine) X Fo Fo	-,			
		Tab	le I - No	on-Deriv	ative S	Sec	uritie	s A	cquired, [	Dispo	osed	of, or B	enefic	ially Ow	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,			Code (Instr.		4. Securities Acquired Disposed Of (D) (Instr. and 5)			4 Sec Ben Owr	mount of urities eficially ed owing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amoui	nt (A) or P		ce Trai	orted saction(s) tr. 3 and 4)	,		
		Та	able II -						uired, Dis s, options						d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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 of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Г									Amoun or Numbe	1				
					Code	v	(A)	(D)	Date Exercisable		ration	Title	of Shares					
Phantom Stock Units	(1)	05/01/2006 <sup>(2)</sup>	05/01	/2006	Code A	v	<b>(A)</b> 54.69	(D)		Date		Title Common Stock	of		7,590.69	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. Denotes Unit Price

6. 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.

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

\*\* Signature of Reporting Person Date

05/03/2006

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.