FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
D	OMB Number:	3235-0287								

hours per response:

Estimated average burden

0.5

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* <u>Uccelletti Nello</u>			2. Issuer Name and Ticker or Trading Symbol TechnipFMC plc [FTI]								Check all app Direct	olicable) ctor	10% (Owner			
(Last) (First) (Middle) C/O TECHNIPFMC PLC ONE ST. PAUL'S CHURCHYARD			3. Date of Earliest Transaction (Month/Day/Year) 02/18/2019									X Officer (give title Other (specify below) President, Onshore/Offshore					
	-		P	4. If	Ameno	dment, Da	ate of	f Original	Filed	(Month/Da	ıy/Yea	r)		ne) X Forn Forn	n filed by One n filed by Moi	e Reporting Pers	son
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date			Day/Year) Exec		Execution Date, if any		Transaction Disp		Disposed	sposed Of (D) (Instr. 3,			d Securi Benefi Owned	ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount			Price	Transa	action(s)		(1130.1.4)
Shares			02/18/2	2019				A		30,000	(1)	A	\$() 1!	55,927	D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		Date, T	Code (Instr.		of Derivative Securities Acquired (A) or Disposed of (D)	ve es d	Expiratio	n Date	е	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	(Final Mello) (Final	(First) (CHNIPFMC PLC PAUL'S CHURCHYARD N X0 (State) (Table Security (Instr. 3) Shares Ta 2. Conversion or Exercise Price of Derivative (Month/Day/Year)	(First) (Middle) CHNIPFMC PLC PAUL'S CHURCHYARD N X0 EC4M 8AI (State) (Zip) Table I - Non Security (Instr. 3) Shares Table II - D (e 2. Conversion or Exercise Price of Derivative Price of Derivative (Month/Day/Year) Security (Month/Day/Year) 3A. Deeme Execution if any (Month/Day/Year)	(First) (Middle) CHNIPFMC PLC PAUL'S CHURCHYARD N X0 EC4M 8AP (State) (Zip) Table I - Non-Derivation (Month/Date (Month/Date (Month/Day/Year)) Table II - Derivative (e.g., pu 2. Transaction Date (Month/Day/Year) Conversion or Exercise Price of Derivative (Month/Day/Year) Conversion Operivative (Month/Day/Year) A. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year)	(First) (Middle) (First) (Middle) 2. Transaction Date (Month/Day/Year) Conversion or Exercise Price of Derivative (Month/Day/Year) (First) (Middle) 3. 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Explanation of Responses:

1. On July 1, 2016, the Reporting Person was granted restricted stock units subject to certain performance criteria. On February 18, 2019, the Compensation Committee certified the performance level pursuant to the terms of the award, and as a result, 30,000 restricted stock units were awarded, each of which represents a contingent right to receive one Ordinary Share that will vest on July 1, 2020.

Date

Exercisable

(D)

Expiration

Date

Remarks:

/s/ Lisa P. Wang, Attorney-In-Fact 02/19/2019

Number

of Shares

Title

** 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.