## 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> POTTER ROBERT L					2. Issuer Name and Ticker or Trading Symbol FMC TECHNOLOGIES INC [FTI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last)					3. Date of Earliest Transaction (Month/Day/Year) 05/31/2005								x	Direct Office below	er (give title /)	title 0ther below) Vice President		specify	
(Street) HOUST( (City)	HOUSTON TX 77067				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv ₋ine) X	,					
Table I - Non-Deriva           1. Title of Security (Instr. 3)         2. Transact Date (Month/Day)				ction	ion 2A. Deemed Execution Date,			3. Transaction Code (Instr. and 5)			rities Acq ed Of (D)	uired (A	.) or	5. Amo Securit Benefic Owned	ount of ties cially	6. Owner Form: Di (D) or Indirect	rect (I)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amoun	Amount (A) or (D)		ce			(Instr. 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)	ative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any				ransaction of Code (Instr. Derivativ			6. Date Exe Expiration (Month/Day		d 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		of Deri Sec	rice ivative urity tr. 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)		
				Code	v	(A)	(D)	Date Exercisable		piration Ite	Title	Amour or Numbe of Shares	er						
Phantom Stock Units	(1)	05/31/2005 <sup>(2)</sup>	05/31/2005	A		303.43		(3)		(3)	Common Stock	0.00(	4) \$4	.26 <sup>(5)</sup>	15,875.67		D		
Phantom Stock Units	(1)	06/01/2005 <sup>(6)</sup>	06/01/2005	А		299.91		(3)		(3)	Common Stock	0.00(	4) \$4	.31 <sup>(5)</sup>	16,175.58		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, by
 06/02/2005

 Power of Attorney
 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.