FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287
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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

| Name and Address of Reporting Person* Glickman Barry | | | | | | 2. Issuer Name and Ticker or Trading Symbol FMC TECHNOLOGIES INC [FTI] | | | | | | | | | 5. Relationship of Reporting Person(s) to Is (Check all applicable) Director 10% Ov | | | | | |
|--|--|--|--|--|--|--|--|--|------|-------|--|---|----------------|--|---|--|-----------------------|---|--|-------------|
| (Last) 5875 NO | (Last) (First) (Middle) 5875 NORTH SAM HOUSTON PARKWAY | | | Y WEST | | 3. Date of Earliest Transaction (Month/Day/Year) 01/12/2017 | | | | | | | | | X | X Officer (give title below) VP, Subse | | | below) | (specify |
| (Street) HOUSTON TX 77086 (City) (State) (Zip) | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | . Indivine) | Form Form | dual 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 | | | | | | | | | | | | | | | | | | | |
| | | | | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispos | | | rities Acquired (/ ed Of (D) (Instr. 3 | | | | | icially d | Fori (D) (Indi | Ownership m: Direct or irect (I) str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Pric | e | Repor Trans | | (1115 | u. 4) | (111501. 4) |
| Common Stock | | | | 01/12/2017 | | | | A | | 26,65 | 9 | A | \$36 | | 127,269 | | | D | | |
| Common Stock | | | | 01/12/2017 | | | | F | | 33,94 | 7 | D | \$36 | | 93,322 | | | D | | |
| Common Stock | | | | 01/17/2017 | | | | J (1) | | 93,32 | 2 | D | \$0 (1) | | 0.0000 | | | D | | |
| 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) | vative Conversion Date Execution or Exercise (Month/Day/Year) if any | | | | | 5. Nu of Deriv Secur Acqu (A) or Disposof (D) (Instrand 5 | ative rities ired r osed . 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Numbe of Title Shares | | ount nber | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. Pursuant to the Business Combination Agreement, dated as of June 14, 2016 (the "Business Combination Agreement") by and among TechnipFMC plc ("TechnipFMC"), FMC Technologies, Inc. ("FMCTI") and Technip S.A. ("Technip"), each ordinary share of FMCTI beneficially owned by the Reporting Person at the effective time of the transaction contemplated by the Business Combination Agreement will be exchanged for 1.00 ordinary share of TechnipFMC.

<u>Lisa P. Wang, Attorney-In-</u> <u>Fact</u>

01/17/2017

** 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.