### Edgar Filing: FMC TECHNOLOGIES INC - Form 4

FMC TECH Form 4 March 09, 2	INOLOGIES INC	2								
FORM	ЛЛ							OMB A	PPROVAL	
	UNITED	STATES		RITIES An ashington			COMMISSIO	N OMB Number:	3235-028	37
Check t if no lor subject Section Form 4 Form 5 obligati may con <i>See</i> Inst	nger to 16. or Filed put ons ntinue.	rsuant to S (a) of the l	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940					Estimated burden hou response	Estimated average burden hours per	
1(b).										
(Print or Type	Responses)									
	Address of Reporting MICHAEL W	Person <sup>*</sup>	Symbol	er Name <b>and</b> TECHNOI		Trading	Issuer	of Reporting Per		
(Last)	(First) (	Middle)	3 Date of	of Earliest T	ransaction		(Ch	eck all applicabl	e)	
1803 GEA				Day/Year)	Tansaction		below)	ve title 109 ve title Oth below) Human Resource		
(Street) HOUSTON, TX 77067			4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
HOUSIOI	N, IA //00/						Person			
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				0000	- intount	(2) 1100				
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	Perso inforr requi	ons who res nation cont red to respo	or indirectly. spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	De
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Se

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A Disposed of (Instr. 3, 4, a 5)	(D)					(In
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	<u>(1)</u>	03/08/2005(2)	03/08/2005	А	1,956.96		(3)	(3)	Common Stock	0 (4)	\$

## **Reporting Owners**

Reporting Owner Name / Address	ss Relationships						
	Director	10% Owner	Officer	Other			
MURRAY MICHAEL W 1803 GEARS ROAD HOUSTON, TX 77067			VP - Human Resources				
Signatures							

By: By: James L. Marvin	03/02/2005		
**Signature of Reporting Person	Date		

# **Explanation of Responses:**

- 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).
- (1) N/A

Acquisition of Phantom Stock Units (in an exempt transaction) under the FMC Technologies, Inc. Non-Qualified Savings and Investment (2) 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.

- Phantom Stock Units are payable in cash following termination or retirement of the reporting person's employment with FMC (3) Technologies, Inc., or death.
- A participant's interest in the NQ Plan is represented in units (referred to as Phantom Stock Units) which consist of phantom shares of (4) FMC Technologies, Inc. Common Stock and uninvested cash balances held by the NQ Plan for administrative convenience.
- (5) Denotes Unit Price

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.