Edgar Filing: FLUOR CORP - Form 4

FLUOR CO Form 4 March 08, 2										
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FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Excha								Expires: Estimated a burden hou response	ours per	
obligatic may con <i>See</i> Instr 1(b).	tinue. Section 17(a) of uction		tility Hold	ling Con	npan	y Act of	1935 or Section	n		
(Print or Type)	Responses)									
1. Name and A HERNANE	Symbol	2. Issuer Name and Ticker or Trading Symbol FLUOR CORP [FLR]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Midd	le) 3 Date o	f Earliest Tr	ansaction			(Chec	k all applicable	;)	
C/O FLUO	R CORPORATION, NAS BOULEVARD	(Month/I	(Month/Day/Year) 03/06/2016				Director 10% Owner X Officer (give title Other (specify below) below) below) EVP, Chief Legal Officer/Sec.			
			f Amendment, Date Original ed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
IRVING, T	X 75039							Iore than One Re		
(City)	(State) (Zip) Tab	le I - Non-D	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	aı	ecution Date, if	3. Transactio Code (Instr. 8)	(Instr. 3,	ispose	d 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)		
Common Stock	03/06/2016		F <u>(1)</u>	4,024	D	\$ 49.17	97,668	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

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

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
HERNANDEZ CARLOS M C/O FLUOR CORPORATION 6700 LAS COLINAS BOULEVARD IRVING, TX 75039			EVP, Chief Legal Officer/Sec.				
Signatures							
/s/ Eric P. Helm by Power of Attorney <u>**</u> Signature of Reporting Person	0070	8/2016 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).

Pursuant to the Issuer's Amended and Restated 2008 Executive Performance Incentive Plan and the terms of the related award agreement, each time shares of common stock are issued upon the vesting of restricted stock units, a portion of the shares are automatically withheld by the Issuer to satisfy the resulting tax withholding obligation. In connection with the vesting of 9,590 restricted stock units held by the

(1) Reporting Person on 3/6/2016, the Issuer has withheld 4,024 shares of common stock to satisfy the resulting tax withholding obligation. The withholding of these shares occurred automatically upon the vesting of the restricted stock units, and as such, no investment decision was made by the Reporting Person in connection with this transfer.

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.