Edgar Filing: FLUOR CORP - Form 4

FLUOR CO	RP										
Form 4											
March 08, 20)16										
FORM	14									OMB AF	PPROVAL
	UNITED	STATES				ND EX(D.C. 20		NGE C	OMMISSION	OMB Number:	3235-0287
if no long subject to Section 1 Form 4 o	Check this box if no longer subject to Section 16. Form 4 or					ES IN BENEFICIAL OWNERSHIP OF ECURITIES					January 31, 2005 Iverage rs per 0.5
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17	(a) of the H		tility H	lold	ing Con	ipany	Act of	e Act of 1934, 1935 or Section 0	1	
(Print or Type F	Responses)										
1. Name and A Oosterveer I	ddress of Reporting Peter W.B.	g Person <u>*</u>	2. Issuer Symbol FLUOR			Ticker or FLR]	Tradir	ıg	5. Relationship of Issuer		
(Last)	(First)	(Middle)	3. Date of	f Earliest	t Tra	ansaction			(Check	k all applicable	2)
	R CORPORATIONAS BOULEVA		(Month/D 03/06/20	-	.)				Director X Officer (give below) Chief C		Owner er (specify er
	(Street)		4. If Ame Filed(Mor			te Original	l		6. Individual or Jo Applicable Line) _X_ Form filed by C	-	-
IRVING, T	X 75039								Form filed by M Person		
(City)	(State)	(Zip)	Tabl	e I - Noi	n-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year		n Date, if	Code (Instr.	8)	4. Securit n(A) or Di (Instr. 3, Amount	sposed 4 and (A) or	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>		4,378	D	\$ 49.17	91,593.093	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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Tit Amou Unde Secur (Instr	int of rlying	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				
Oosterveer Peter W.B. C/O FLUOR CORPORATION 6700 LAS COLINAS BOULEVARD IRVING, TX 75039			Chief Operating Officer					
Signatures								

/s/ Eric P. Helm by Power of	
Attorney	03/08/2016
**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).

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 10,433 restricted stock units held by the

By the issuer to satisfy the resulting tax withholding obligation. In connection with the vesting of 10,455 resulted stock units herd by the Reporting Person on 3/6/2016, the Issuer has withhold 4,378 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.