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FLUOR CO								
July 07, 201							PPROVAL	
FORM	UNITED	STATES SI	ECURITIES A Washington,	ND EXCHANGE D.C. 20549	COMMISSION		3235-0287	
Check th if no long subject to Section 1 Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b).	ger 6. 9 7 Filed pur ns 5 Section 17(Expires: Estimated burden hou response n	urs per					
(Print or Type I	Responses)							
1. Name and Address of Reporting Person <u>*</u> PRUEHER JOSEPH W			2. Issuer Name and mbol LUOR CORP []	Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (I		Date of Earliest Ti	-	(Check all applicable)			
C/O FLUOR CORPORATION, 6700 LAS COLINAS BOULEVARD			10nth/Day/Year) 7/05/2016		X_ Director 10% Owner Officer (give title below) Other (specify below)			
IRVING, T	(Street)		If Amendment, Da led(Month/Day/Year	-	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
					Person			
(City)	(State)	(Zip)	Table I - Non-E	Derivative Securities A	cquired, Disposed of	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Dat any (Month/Day/Y	Code Year) (Instr. 8)	4. Securities nAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or	Securities H Beneficially (Owned (5. Ownership Form: Direct D) or Indirect I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount (D) Price				
Reminder: Rep	oort on a separate line	for each class	of securities benef	information cont required to respo	or indirectly. pond to the collec ained in this form and unless the form ntly valid OMB con	are not m	SEC 1474 (9-02)	

 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	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

number.

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(Instr. 3)	Price of Derivative Security	ivative		(Instr.	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			I)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock Units	<u>(1)</u>	07/05/2016		A		72.1481		(2)	(2)	Common Stock	72.1481

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
PRUEHER JOSEPH W C/O FLUOR CORPORATION 6700 LAS COLINAS BOULEVARD IRVING, TX 75039	Х						
Signatures							
/s/ Eric P. Helm by Power of Attorney	07/0	7/2016					
**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).
- (1) Each phantom stock unit is the economic equivalent of one share of Fluor common stock.

These phantom units were acquired under the Fluor Corporation 409A Director Deferred Compensation Program (the "Program") through the crediting of dividends and are to be settled in cash. Distributions will be made, at the election of the reporting person, either (i) in the distribution year specified by the reporting person or (ii) upon the reporting person's termination of service as a director, death or

(2) distribution year specified by the reporting person of (ii) upon the reporting person's termination of service as a director, dealt of disability, in a single lump sum payment or annual installment payments over a period of two to ten years. The reporting person may transfer the phantom units into an alternative investment at any time. However, unvested units granted as matching contributions under the Program shall be forfeited by the reporting person to the extent attributable to the transferred units.

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.