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FLUOR CORF Form 4	2										
November 12,	2013										
FORM	4		CECU			CHANGE			OMB APPROVAL		
	Washington, D.C. 20549							N OMB Number:	3235-0287		
Check this if no longer subject to Section 16. Form 4 or Form 5	MENT OF		SECUI	Estimated burden ho response.	ours per						
obligations may continu <i>See</i> Instruct 1(b).	ue. Section 170	(a) of the F	Public U	tility Hol	lding Co		nge Act of 1934 of 1935 or Sect 940				
(Print or Type Rea	sponses)										
1. Name and Address of Reporting Person <u>*</u> OLIVERA ARMANDO J			Symbol	er Name an R CORP		Trading	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Middle)	3. Date of Earliest Transaction				(Check all applicable)				
6700 LAS COLINAS BOULEVARD			(Month/Day/Year) 11/08/2013				X Director Officer (gi below)	ve title 0t below)	% Owner her (specify		
	(Street)		4. If Amendment, Date Original Filed(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 				
IRVING, TX	75039						Person	Wore than One I	Reporting		
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Benefici	ally Owned		
	Transaction Date Aonth/Day/Year)	2A. Deemee Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	(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)		
Reminder: Repor	t on a separate lin	e for each cla	ass of sec				or indirectly				
Kenninder, Kepor			155 01 566		Perso infor requi	ons who res nation con red to resp ays a curre	spond to the colle tained in this forr ond unless the fo ntly valid OMB co	n are not orm	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
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	Í	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock Units	<u>(1)</u>	11/08/2013		А		368.9682		(2)	(2)	Common Stock	368.9682

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
OLIVERA ARMANDO J 6700 LAS COLINAS BOULEVARD IRVING, TX 75039	Х						
Signatures							
/s/ Eric P. Helm by Power of Attorney	11/12	2/2013					

**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 Deferred Directors' Fees program (the "Program") 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 disability, in a single lump sum payment

(2) reporting person, or (ii) upon the reporting person's termination or service as a director, death or disability, if a single fully 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.