

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2019</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information For calendar plan year 2019 or fiscal plan year beginning <u>01/01/2019</u> and ending <u>12/31/2019</u>
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information		
1a Name of plan <u>FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM</u>	1b Three-digit plan number (PN) ▶	<u>001</u>	
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>FMC TECHNOLOGIES, INC.</u> <u>11740 KATY FREEWAY</u> <u>HOUSTON, TX 77079</u>	1c Effective date of plan <u>05/01/2001</u>	2b Employer Identification Number (EIN) <u>36-4412642</u>	2c Plan Sponsor's telephone number <u>281-591-4000</u>
		2d Business code (see instructions) <u>339900</u>	

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	<u>10/08/2020</u>	<u>AMANDA DEAN</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

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3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 4287
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 596 6a(2) 518 6b 2248 6c 952 6d 3718 6e 495 6f 4213 6g 6h 4
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

1A 3F 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1)** ☒ **R** (Retirement Plan Information)
- (2)** ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3)** ☒ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- (1)** ☒ **H** (Financial Information)
- (2)** ☐ **I** (Financial Information – Small Plan)
- (3)** ☐ 0 **A** (Insurance Information)
- (4)** ☒ **C** (Service Provider Information)
- (5)** ☒ **D** (DFE/Participating Plan Information)
- (6)** ☐ **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2019 Form M-1 annual report. If the plan was not required to file the 2019 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2019 This Form is Open to Public Inspection
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For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>FMC TECHNOLOGIES, INC.</u>	D Employer Identification Number (EIN) <u>36-4412642</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2019</u>	
2 Assets:	
a Market value	2a <u>475484437</u>
b Actuarial value	2b <u>523032881</u>
3 Funding target/participant count breakdown	(1) Number of participants (2) Vested Funding Target (3) Total Funding Target
a For retired participants and beneficiaries receiving payment.....	<u>2672</u> <u>323367353</u> <u>323367353</u>
b For terminated vested participants.....	<u>1053</u> <u>72142367</u> <u>72142367</u>
c For active participants	<u>596</u> <u>94973949</u> <u>98743678</u>
d Total.....	<u>4321</u> <u>490483669</u> <u>494253398</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐	
a Funding target disregarding prescribed at-risk assumptions	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor.....	4b
5 Effective interest rate	5 <u>5.57</u> %
6 Target normal cost.....	6 <u>9034000</u>

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE		<u>09/11/2020</u>
	Signature of actuary	Date
<u>DAVID M ANDERSON</u>	Type or print name of actuary	<u>20-07493</u>
		Most recent enrollment number
<u>WILLIS TOWERS WATSON US LLC</u>	Firm name	<u>713-754-5400</u>
<u>811 LOUISIANA STREET</u> <u>SUITE 2200</u> <u>HOUSTON, TX 77002</u>	Address of the firm	Telephone number (including area code)

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.

Schedule SB (Form 5500) 2019
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Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	15415034	0
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	15415034	0
10 Interest on line 9 using prior year's actual return of <u>-11.63</u> %	-1792768	0
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.74</u> %		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	13622266	0

Part III Funding Percentages

14 Funding target attainment percentage	14	103.06 %
15 Adjusted funding target attainment percentage	15	105.82 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	115.22 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls**18** Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ▶			18(b)	0	18(c)
					0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20 Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No
- b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No
- c** If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost**21** Discount rate:**a** Segment rates:1st segment:
3.74 %2nd segment:
5.35 %3rd segment:
6.11 %☐ N/A, full yield curve used**b** Applicable month (enter code)**21b**

4

22 Weighted average retirement age**22**

64

23 Mortality table(s) (see instructions) ☐ Prescribed - combined☒ Prescribed - separate☐ Substitute**Part VI Miscellaneous Items****24** Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**25** Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No**26** Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No**27** If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.**27****Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years****28** Unpaid minimum required contributions for all prior years **28** 0**29** Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a) **29** 0**30** Remaining amount of unpaid minimum required contributions (line 28 minus line 29) **30** 0**Part VIII Minimum Required Contribution For Current Year****31** Target normal cost and excess assets (see instructions):**a** Target normal cost (line 6) **31a** 9034000**b** Excess assets, if applicable, but not greater than line 31a **31b** 9034000**32** Amortization installments:**a** Net shortfall amortization installment Outstanding Balance 0 Installment 0**b** Waiver amortization installment 0 0**33** If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount **33****34** Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33) **34** 0**35** Balances elected for use to offset funding requirement Carryover balance 0 Prefunding balance 0 Total balance 0**36** Additional cash requirement (line 34 minus line 35) **36** 0**37** Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) **37** 0**38** Present value of excess contributions for current year (see instructions)**a** Total (excess, if any, of line 37 over line 36) **38a** 0**b** Portion included in line 38a attributable to use of prefunding and funding standard carryover balances **38b** 0**39** Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) **39** 0**40** Unpaid minimum required contributions for all years **40** 0**Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)****41** If an election was made to use PRA 2010 funding relief for this plan:**a** Schedule elected ☐ 2 plus 7 years ☐ 15 years**b** Eligible plan year(s) for which the election in line 41a was made ☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2019
		This Form is Open to Public Inspection.

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019	
A Name of plan FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 FMC TECHNOLOGIES, INC.	D Employer Identification Number (EIN) 36-4412642

Part I	Service Provider Information (see instructions)
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You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
NORTHERN TRUST COMPANY
36-1561860

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

VAN BIEMA VALUE PARTNERS LLC

20-1272199

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	NONE	944754	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

ROYCE & ASSOCIATES

52-2343049

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	444448	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

AON SERVICE CORPORATION

35-3051915

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64	NONE	362833	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

CARDINAL CAPITAL MANAGEMENT, LLC

06-1422705

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	344298	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

NORTHERN TRUST COMPANY

36-1561860

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21	NONE	336088	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

(a) Enter name and EIN or address (see instructions)

DALTON INVESTMENT LLC

95-4736598

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	180295	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

SPEECE THORSON CAPITAL GROUP

41-1701874

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	134070	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

TOWERS WATSON

53-0181291

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	NONE	63682	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

MCCONNELL & JONES, LLP

76-0488832

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	5165	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2019 This Form is Open to Public Inspection.
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For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan <u>FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>FMC TECHNOLOGIES, INC.</u>	D Employer Identification Number (EIN) <u>36-4412642</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
---------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: COLTV SHORT TERM INVT FD

b Name of sponsor of entity listed in (a): THE NORTHERN TRUST COMPANY

c EIN-PN <u>36-6036794-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>41277739</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2019 This Form is Open to Public Inspection
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For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019		
A Name of plan FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 FMC TECHNOLOGIES, INC.	D Employer Identification Number (EIN) 36-4412642	

Part I	Asset and Liability Statement
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1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	52391	31200
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)		
(2) Participant contributions.....	1b(2)		
(3) Other.....	1b(3)	2021088	743196
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	12182506	9421500
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	39350	17978
(B) Common.....	1c(4)(B)	108689188	108809854
(5) Partnership/joint venture interests	1c(5)	120063311	176518722
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans.....	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	33494474	41277739
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	37585716	37495242
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	161446225	144755051

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	475574249	519070482

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	397500	288252
i Acquisition indebtedness	1i	89812	318385
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	487312	606637

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	475086937	518463845
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	260276	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)	20058	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		280334
(2) Dividends: (A) Preferred stock	2b(2)(A)	2288	
(B) Common stock	2b(2)(B)	2527503	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	2278938	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		4808729
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	76310170	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	100101408	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-23791238
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	91028360	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		91028360

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		1697715
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1308186
c Other income	2c		191554
d Total income. Add all income amounts in column (b) and enter total	2d		75523640

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	29309315	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		29309315
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	68847	
(2) Contract administrator fees	2i(2)	362833	
(3) Investment advisory and management fees	2i(3)	2047865	
(4) Other	2i(4)	357872	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		2837417
j Total expenses. Add all expense amounts in column (b) and enter total	2j		32146732

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		43376908
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unmodified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☒ Yes ☐ No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **MCCONNELL & JONES, L.L.P.**

(2) EIN: **76-0488832**

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)

b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)

	Yes	No	Amount
4a		X	
4b		X	

	Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....			
4d		X	
e Was this plan covered by a fidelity bond?	X		15000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?.....			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	X		
4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?.....		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ☒ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 4224434. (See instructions.)

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Retirement Plan Information</div> <div>This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).</div> <div>▶ File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2019</div> <div>This Form is Open to Public Inspection.</div>
For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019		
A Name of plan FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 FMC TECHNOLOGIES, INC.		D Employer Identification Number (EIN) 36-4412642
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 36-3046063		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year		3 0
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month Day Year If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)		6a
b Enter the amount contributed by the employer to the plan for this plan year		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☒ Yes ☐ No ☐ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ☐ Increase ☐ Decrease ☐ Both ☒ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2019 v. 190130		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14	Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:		
a	The current year	14a	
b	The plan year immediately preceding the current plan year	14b	
c	The second preceding plan year	14c	
15	Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
a	The corresponding number for the plan year immediately preceding the current plan year	15a	
b	The corresponding number for the second preceding plan year	15b	
16	Information with respect to any employers who withdrew from the plan during the preceding plan year:		
a	Enter the number of employers who withdrew during the preceding plan year	16a	
b	If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	
17	If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐		

Part VI	Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans
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18	If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment
19	<p>If the total number of participants is 1,000 or more, complete lines (a) through (c)</p> <p>a Enter the percentage of plan assets held as: Stock: <u>27.0</u> % Investment-Grade Debt: <u>7.0</u> % High-Yield Debt: <u>0.0</u> % Real Estate: <u>7.0</u> % Other: <u>59.0</u> %</p> <p>b Provide the average duration of the combined investment-grade and high-yield debt: ☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☒ 21 years or more</p> <p>c What duration measure was used to calculate line 19(b)? ☒ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):</p>
20	<p>PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.</p> <p>a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No</p> <p>b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box: ☐ Yes. ☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date. ☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date. ☐ No. Other. Provide explanation _____</p>

**FINANCIAL STATEMENTS AND
INDEPENDENT AUDITOR'S REPORT
FMC TECHNOLOGIES, INC.
EMPLOYEES' RETIREMENT PROGRAM
DECEMBER 31, 2019 AND 2018**

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Independent Auditor's Report

To the Participants and Plan Administrator of
the FMC Technologies, Inc. Employees' Retirement Program

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of FMC Technologies, Inc. Employees' Retirement Program (the Plan), which comprise the Statements of Net Assets Available for Benefits as of December 31, 2019 and 2018, and the related Statements of Changes in Net Assets Available for Benefits for the years then ended, and the related Notes to Financial Statements.

Plan Management's Responsibility for the Financial Statements

Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America (US GAAS). Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA), Plan management instructed us not to perform, and we did not perform, any auditing procedures with respect to investments information and related income included in the financial statements and supplemental information, which was certified by Northern Trust Company, the trustee of the Plan (Trustee), except for comparing such information with the related information included in the financial statements. We have been informed by Plan management that the Trustee holds the Plan's investments assets and executes investment transactions. Plan management has obtained a certification from the Trustee as of December 31, 2019 and 2018 and for the years then ended, that the information provided to Plan management by the Trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Other Matter

The supplemental information listed in the table of contents as of and for the year ended December 31, 2019 is required by DOL Rules and Regulations for Reporting and Disclosure under ERISA and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental information.

Report on Form and Content in Compliance with DOL Rules and Regulations

The form and content of the information included in the financial statements and supplemental information, other than that derived from the information certified by the Trustee, has been audited by us in accordance with US GAAS and, in our opinion, is presented in compliance with DOL Rules and Regulations for Reporting and Disclosure under ERISA.

McConnell & Jones LLP

Houston, Texas
October 6, 2020

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

Statements of Net Assets Available for Benefits

	December 31,	
	2019	2018
Assets		
Investments at fair value (Note 7):		
Common stock	\$ 111,998,270	\$ 111,166,251
Preferred stock	17,978	39,350
Common / collective trusts	41,277,739	33,494,474
Registered investment companies	37,495,242	37,585,716
Hedge funds	140,632,641	157,410,723
Publicly traded partnerships	1,253,874	238,683
Limited partnerships	175,264,848	120,063,311
Cash - interest bearing	9,421,500	12,182,506
Other	933,994	1,319,756
Total investments at fair value	518,296,086	473,500,770
Receivables:		
Interest and dividends receivable	743,196	835,719
Unsettled purchases	—	1,185,369
Total receivables	743,196	2,021,088
Cash - noninterest bearing	31,200	52,391
Total assets	519,070,482	475,574,249
Liabilities		
Unsettled sales	318,385	89,812
Accrued expenses	288,252	397,500
Total liabilities	606,637	487,312
Net assets available for benefits	\$ 518,463,845	\$ 475,086,937

The accompanying notes are an integral part of the financial statements.

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

Statements of Changes in Net Assets Available for Benefits

	Year ended December 31,	
	2019	2018
Investment income:		
Net appreciation (depreciation) in fair value of investments	\$ 69,152,886	\$ (72,103,016)
Interest and dividends	6,370,754	7,077,364
Total net investment income (loss)	75,523,640	(65,025,652)
Total additions (reductions)	75,523,640	(65,025,652)
Benefits paid	29,309,315	28,148,468
Administrative expenses	2,837,417	5,804,356
Total deductions	32,146,732	33,952,824
Net increase (decrease) in net assets available for benefits	43,376,908	(98,978,476)
Net assets available for benefits:		
Beginning of year	475,086,937	574,065,413
End of year	<u>\$ 518,463,845</u>	<u>\$ 475,086,937</u>

The accompanying notes are an integral part of the financial statements.

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2019 AND 2018**

NOTE 1. DESCRIPTION OF THE PLAN

The following description of the FMC Technologies, Inc. Employees' Retirement Program (the "Plan") provides general information. Participants should refer to the Plan document for a complete description of the Plan's provisions.

General

The Plan is a defined benefit pension plan covering certain employees of FMC Technologies, Inc. (the "Company" or "Plan administrator"), its retirees and terminated vested employees. The Plan is subject to the provisions of The Employee Retirement Security Act of 1974, as amended ("ERISA"). The Plan's assets are held in a trust with The Northern Trust Company (the "Trustee"). All of the assets of the Plan are available to pay benefits to participants of the Plan.

The Employee Benefits Committee and Plan Investment Committee are subcommittees of the Compensation Committee of the Board of Directors of the Company. The Employee Benefits Committee has overall responsibility for the operation and administration of the Plan while the investment decisions related to the Plan are made by the Plan Investment Committee.

Plan Amendments

On October 2, 2009, the Board of Directors of the Company amended the Plan to freeze participation in the Plan for all new nonunion employees hired or rehired on or after January 1, 2010, and current nonunion employees with less than five years of vesting service as of December 31, 2009 ("frozen participants"). For current nonunion employees with less than five years of vesting service as of December 31, 2009, benefits accrued under the Plan and earned as of that date were frozen based on credited service and pay as of December 31, 2009.

On December 31, 2017, the Company amended the FMC Technologies, Inc. Employees' Retirement Program Part I Salaried and Nonunion Hourly Employees' Retirement Plan and the FMC Technologies, Inc. Salaried Employees' Equivalent Retirement Plan (the "Plans") to freeze benefit accruals for all participants of the Plans as of December 31, 2017. After that date, nonunion participants in the Plans no longer accrue any further benefits and participants' benefits under the Plans are determined based on credited service and eligible earnings as of December 31, 2017.

Effective December 31, 2018, the FMC Technologies, Inc. Employees' Retirement Program Part II Union Employees' Retirement Plan was amended to freeze future participation and benefit accruals for all union participants of the Plan.

Eligibility, Vesting and Benefits

The following provisions of the Plan apply to the eligible salaried and nonunion hourly employees of the Company:

The normal retirement age is 65. A participant who terminates employment prior to completing five years of vesting service is not eligible to receive a pension under the Plan. However, an active participant becomes vested at age 65 regardless of the years of service.

The normal annual benefit amount is equal to the sum of [(1) + (2)] times (3) where:

- (1) 1% of final average* annual earnings up to allowable Social Security Covered Compensation

Plus

1.5% of final average* annual earnings in excess of allowable Social Security Covered Compensation

Times

Years of credited service projected to age 65 (maximum of 35 years)

- (2) 1.5% of final average* annual earnings times years of credited service projected to age 65 in excess of 35 years, and
- (3) Ratio of years of credited service as of termination to years of credited service projected to age 65

*average is the highest consecutive 60 months of the last 120 months of eligible earnings

A participant's retirement benefit is increased by \$1.00 for each \$120 of unwithdrawn employee contributions accumulated with interest.

Plan participants hired before January 1, 1984 are eligible for early retirement on or after age 55. Plan participants hired after December 31, 1983 are eligible for early retirement following attainment of age 55 and 10 years of credited service. For early retirement, the benefit is the monthly accrued benefit, reduced by early retirement reduction factors outlined in the Plan.

The Plan provides for surviving spouse benefits in the case of the death of an active participant. In addition, the Plan offers retirees the option to elect joint and survivor annuity payment options to provide benefits to a surviving spouse or beneficiary of a retired participant.

The following provisions of the Plan apply to bargained employees of FMC Technologies Measurement Solutions, Inc. (formerly Smith Meter, Inc.):

The normal retirement age is the earlier of age 62 with 10 years of vesting service or age 65. A participant who terminates employment prior to completing vesting service of 5 years is not eligible to receive a pension under the Plan. The normal monthly benefit amount is \$42.00 times the years of service. Participants are entitled to early retirement following attainment of age 57 and 10 years of credited service. For early retirement, the benefit is the monthly accrued benefit, reduced by early retirement reduction factors outlined in the Plan. Certain union participants are eligible for disability retirement benefits upon becoming permanently and totally disabled after completing 10 years of credited service. The Plan provides for surviving spouse benefits in the case of the death of an active participant. In addition, the Plan offers retirees the option to elect joint and survivor annuity payment options to provide benefits to a surviving spouse or beneficiary of a retired participant.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting in accordance with generally accepted accounting principles in the United States of America ("GAAP").

Use of Estimates

The preparation of financial statements in conformity with GAAP requires management of the Plan to make estimates and assumptions that affect the reported amounts of assets and liabilities, and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements, and changes therein. Actual results could differ from those estimates.

Investments, Valuation and Income Recognition

The Plan's financial statements and supplemental schedules include unaudited information prepared by the Trustee. The Plan has obtained certifications from the Trustee that such information is complete and accurate. Investments are stated at fair value. See Note 7 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade date basis. The Plan presents in the statement of changes in net assets available for benefits the net appreciation (depreciation) in the fair value of its investments which consists of the related gains and losses on investments bought and sold during the year, and the unrealized gains and losses on investments held during the year. Dividends are recorded on the record date. Interest income is recorded on the accrual basis.

Administrative Expenses

All permitted administrative expenses are paid from the Plan unless the Company, at its discretion, pays such expenses. Expenses that are paid directly by the Company are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying statements of changes in net assets available for benefits. In addition, certain investment related expenses are included in net appreciation (depreciation) in fair value of investments presented in the accompanying statements of changes in net assets available for benefits.

Payment of Benefits

Benefit payments to participants and beneficiaries are recorded when paid.

Subsequent Events

The COVID-19 pandemic, the sharp decline in commodity prices and heightened volatility in global equity markets have affected and may continue to affect Plan assets. Due to the ongoing economic uncertainty and volatility caused by COVID-19, the resulting financial impact to the Plan cannot be reasonably estimated.

The management of the Plan has evaluated subsequent events that have occurred after December 31, 2019, and through October 6, 2020, the date the financial statements were available to be issued.

Recently Issued Accounting Standards

In August 2018, the Financial Accounting Standards Board issued Accounting Standards Update ("ASU") No. 2018-13, *"Fair Value Measurement (Topic 820): Disclosure Framework—Changes to the Disclosure Requirements for Fair Value Measurement."* This update modifies the disclosure requirement on fair value measurements in Topic 820. The amendments in this ASU are effective for us January 1, 2020. Early adoption is permitted. The amendments on changes in unrealized gains and losses, the range and weighted average of significant unobservable inputs used to develop Level 3 fair value measurements, and the narrative description of measurement uncertainty should be applied prospectively. All other amendments should be applied retrospectively. The updated guidance is not expected to have a material impact on the Plan's financial statements.

Reclassifications

Certain reclassifications have been made to the 2018 financial statements to conform to the 2019 financial statements presentation. These reclassifications had no effect on changes in net assets available for benefits.

NOTE 3. FUNDING POLICY

The Company contributes to the Plan such sums as are actuarially determined to be necessary to provide defined pension benefits to participants, maintain certain acceptable funding levels, and ensure that all contributions are deductible for federal income tax purposes.

The Company's contributions are designed to satisfy the minimum funding requirements under ERISA and the Pension Protection Act of 2006, as amended. In addition, the Company may decide to make contributions above the minimum funding requirements. The determination of required contributions to be made by the Company during 2019 and 2018 was based upon actuarial valuations as of January 1 of each year. There was no minimum required contribution for 2019 or 2018 under ERISA.

The Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. See Note 4 to these financial statements for additional disclosure related to plan termination.

NOTE 4. PLAN TERMINATION

Although the Company has not expressed any intention to do so, in the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

- a. Benefits attributable to employee contributions, taking into account those paid out before termination.
- b. Benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding Plan termination.
- c. Other vested benefits insured by the Pension Benefit Guaranty Corporation ("PBGC") (a U.S. government agency) up to the applicable limitations.
- d. All other vested benefits (that is, vested benefits not insured by the PBGC).
- e. All nonvested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Plan sponsor and the level of benefits guaranteed by the PBGC.

NOTE 5. ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, which are attributable under the Plan's provisions to the services employees have rendered.

Accumulated plan benefits include benefits expected to be paid to (1) retired or terminated employees or their beneficiaries, (2) beneficiaries of employees who have died and (3) present employees or their beneficiaries. Benefits payable under all circumstances (retirement, death, disability and termination of employment) are included to the extent they are deemed attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by an independent actuary and results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability or retirement) between the valuation date and the expected date of payment. The significant actuarial assumptions used in the valuations as of January 1, 2019, were as follows:

- a. Interest rate used to compute the present value of accrued benefits was 9.00%.
- b. The assumed average retirement age was 64.
- c. Eighty percent of all male participants and sixty percent of all female participants were assumed to be married in 2019.
- d. Life expectancy rate: RP-2014 Employee and Annuitant Table for males and females projected with generational improvement at scale MP-2014 adjusted to reflect 0% long-term rate of improvement, with a convergence period between initial and long term rate of improvement of 2008-2027 were used.
- e. The actuarial method used to determine the accumulated plan benefits is the Unit Credit method.

The foregoing actuarial assumptions are based on the presumption of the continuation of the Plan. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

The total actuarial present value of accumulated plan benefits as of January 1, 2019 (the most recent valuation date), consisted of the following:

	January 1, 2019
Vested benefits:	
Participants currently receiving payments	\$ 247,523,606
Other participants	102,143,476
	349,667,082
Nonvested benefits	2,635,973
Total actuarial present value of accumulated plan benefits	\$ 352,303,055

Changes in the total actuarial present value of accumulated plan benefits for the period January 1, 2018 to January 1, 2019, was as follows:

Actuarial present value of accumulated plan benefits, beginning of period	\$ 350,283,049
Increase (decrease) during the period attributable to:	
Benefits accumulated	129,651
Actuarial losses	(74,913)
Increase for interest due to decrease in the discount period	30,289,987
Benefits paid	(28,324,719)
Plan amendments	—
Net increase	2,020,006
Actuarial present value of accumulated plan benefits, end of period	\$ 352,303,055

NOTE 6. INCOME TAXES

The Plan obtained its latest determination letter on July 8, 2014, in which the Internal Revenue Service ("IRS") stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code of 1986, as amended ("Code"). Additional amendments to the Plan have been made and are not covered by the determination letter; however, the Plan administrator and the Plan's legal counsel believe that the Plan, as amended, is designed and is currently administered in compliance with the applicable requirements of the Code.

GAAP requires the management of the Plan administrator to evaluate uncertain tax positions taken by the Plan and to recognize a tax liability (or asset) when the position is more likely than not, based on the technical merits, to be sustained upon examination by the IRS. The management of the Plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2019, there were no uncertain positions taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan has not recognized interest or penalties related to uncertain tax positions. The Plan is subject to routine audits by taxing jurisdictions. There are currently no audits for any tax periods in progress related to the Plan.

NOTE 7. FAIR VALUE OF ASSETS

Fair value is defined as the price that would be received to sell an asset in an orderly transaction between market participants at the reporting date. The fair value framework requires the categorization of assets and liabilities into three levels based upon the assumptions (inputs) used to price the assets or liabilities. Level 1 provides the most reliable measure of fair value, whereas Level 3 generally requires significant management judgment. The three levels are defined as follows:

- *Level 1:* Unadjusted quoted prices in active markets for identical assets and liabilities.
- *Level 2:* Observable inputs other than those included in Level 1. For example, quoted prices for similar assets or liabilities in active markets or quoted prices for identical assets or liabilities in inactive markets.
- *Level 3:* Unobservable inputs reflecting management's own assumptions about the inputs used in pricing the asset or liability.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. The valuation techniques applied maximized the use of observable inputs and minimized the use of non-observable inputs.

The following is a description of the valuation methodologies used for assets measured at fair value:

- *Common and Preferred Stock:* Valued at the closing price reported on the active market on which the securities are traded.
 - *Common/Collective Trusts:* The Plan uses the practical expedient election for the fair value of these investments as the investments are valued at the net asset value of shares held by the Plan at year end. All of the investments in common collective trust funds represent exchange-traded securities with readily observable prices. Common/collective trusts primarily consisted of investments in money market instruments with short maturities.
 - *Publicly Traded Partnerships:* Similar to common and preferred stock, valued at the closing price reported on the active market on which the securities are traded.
 - *Registered Investment Companies:* Valued at quoted market prices, which represent the net asset value of the securities held in such funds at year end. Registered investment companies primarily consisted of investments in emerging market bonds at December 31, 2019, as well as investments in international equities and emerging market bonds at December 31, 2018.
 - *Hedge Funds:* The Plan uses the practical expedient election for the fair value of these investments as the investments are valued at the net asset value of shares held by the Plan at year end. All of the investments in hedge funds represent exchange-traded securities with readily observable prices. There are six investment managers consisting of seven hedge funds.
- † Arcus Japan Value Fund has a 45-day notice period with no redemption frequency restrictions. The fund invests primarily in publicly traded equity securities and debt obligations.

- † Argos Argonaut Fund has a 20-day notice period with no redemption frequency restrictions. The fund invests primarily in publicly traded equity securities and debt obligations.
- † Kingstown Partners Offshore Ltd fund has a graduated redemption period over 10 sequential quarters with a 90-day notice period. The hedge fund's investment objective is to deliver superior risk adjusted returns by employing a value-oriented, event-driven strategy. The fund invests across the capital structure in debt and equity investments.
- † SFP Value Realization Fund has a quarterly redemption frequency with a 90-day notice period. The fund invests primarily in publicly traded equity securities and debt obligations.
- † Simcoe Partners Offshore Ltd fund has a quarterly redemption frequency with a 30-day notice period. The fund invests primarily in publicly traded equity securities and debt obligations.
- † Van Biema Value Ltd fund has an annual redemption frequency with a 120-day notice period. The fund invests in approximately 10 to 20 funds that employ a range of value-oriented investment philosophies. The investment strategy of this fund centers on long-term returns with a strong focus on capital preservation.
- † Van Biema Asia Value Ltd, consisting of three funds, has an annual redemption frequency on the calendar year end with a 120-day notice period. The funds invest in approximately 10 to 20 funds that employ a range of value-oriented investment philosophies. The investment strategy of this fund centers on long-term returns with a strong focus on capital preservation.
- *Limited Partnerships:* The Plan uses the practical expedient election for the fair value of these investments as the investments are valued at the net asset value of shares held by the Plan at year end. All of the investments in limited partnerships represent exchange-traded securities with readily observable prices. There are six limited partnerships.
 - † Acacia Capital, LP has a quarterly redemption frequency with a 30-day notice period. This partnership seeks high long-term returns following a value-oriented investment approach. The partnership may invest in a variety of securities, including U.S. and international equities, debt securities and preferred stocks.
 - † MFP Partners, LP has a quarterly redemption frequency with a 60-day notice period. This partnership seeks high long-term returns following a value-oriented investment approach. The partnership may invest in a variety of securities, including U.S. and international equities, debt securities and preferred stocks.
 - † Van Biema Global Value Fund, LP has an annual redemption frequency on the calendar year end with a 120-day notice period. The fund invests in approximately 10 to 20 funds that employ a range of value-oriented investment philosophies. The investment strategy of this fund centers on long-term returns with a strong focus on capital preservation.
 - † vB Select European Opportunities Fund LP has a quarterly redemption frequency with a 60-day notice period. This partnership seeks to achieve its investment objective by purchasing, holding, selling and trading, currencies and financial instruments including U.S. or non-U.S. securities. The investment strategy of this fund is to achieve long-term capital appreciation on an absolute return basis while limiting down-side risk and volatility.
 - † vB Select Pan-Asia Fund I, LP has a quarterly redemption frequency with a 60-day notice period. This partnership seeks to achieve its investment objective by purchasing, holding, selling and trading, currencies and financial instruments including U.S. or non-U.S. securities. The investment strategy of this fund is to achieve long-term capital appreciation on an absolute return basis while limiting down-side risk and volatility.

† VV Capital Partners, LP has a two year rolling redemption frequency with a 60-day notice period. This partnership seeks high long-term returns following a value-oriented investment approach. The partnership may invest in a variety of securities, including U.S. and international equities, debt securities and preferred stocks.

- *Other*: Valued at quoted market prices, which represent the net asset value of the securities held in such funds at year end. This category consists of corporate debt.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while management of the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different estimate of fair value at the reporting date. There have been no changes in the methodologies used at December 31, 2019 and 2018.

Assets measured at fair value are as follows:

December 31, 2019				
	Total	Level 1	Level 2	Level 3
Cash - interest bearing	\$ 9,421,500	\$ 9,421,500	\$ —	\$ —
Preferred stock	17,978	17,978	—	—
Common stock				
U.S. equities	106,994,752	106,994,752	—	—
International equities	5,003,518	5,003,518	—	—
Registered investment companies	37,495,242	37,495,242	—	—
Other	933,994	933,994	—	—
Common / collective trusts ⁽¹⁾	41,277,739	—	—	—
Hedge funds ⁽¹⁾	140,632,641	—	—	—
Publicly traded partnerships	1,253,874	1,253,874	—	—
Limited partnerships ⁽¹⁾	175,264,848	—	—	—
Total assets at fair value	\$ 518,296,086	\$ 161,120,858	\$ —	\$ —

December 31, 2018				
	Total	Level 1	Level 2	Level 3
Cash - interest bearing	\$ 12,182,506	\$ 12,182,506	\$ —	\$ —
Preferred stock	39,350	39,350	—	—
Common stock				
U.S. equities	104,067,254	104,067,254	—	—
International equities	7,098,997	7,098,997	—	—
Registered investment companies	37,585,716	37,585,716	—	—
Other	1,319,756	1,319,756	—	—
Common / collective trusts ⁽¹⁾	33,494,474	—	—	—
Hedge funds ⁽¹⁾	157,410,723	—	—	—
Publicly traded partnerships	238,683	238,683	—	—
Limited partnerships ⁽¹⁾	120,063,311	—	—	—
Total assets at fair value	\$ 473,500,770	\$ 162,532,262	\$ —	\$ —

⁽¹⁾ Certain investments that are measured at fair value using net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

NOTE 8. RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, credit and overall market risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits.

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

NOTE 9. PARTY-IN-INTEREST TRANSACTIONS

All transactions with the Company, Trustee, the Plan's benefit administrator, service providers or participants are considered party-in-interest transactions. Certain Plan assets are invested in funds managed by the Trustee and Grantham, Mayo, Van Otterloo & Co. LLC ("GMO") (an investment advisor of the Plan); therefore, these transactions qualify as party-in-interest transactions. Expenses for accounting, administrative and investment services are charged to the Plan and totaled \$2.8 million and \$5.8 million in 2019 and 2018, respectively.

SUPPLEMENTAL INFORMATION

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

EIN: 36-4412642 Plan Number: 001

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2019

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Common stock:			
	ACI Worldwide Inc.	59,260	\$ 1,148,919	\$ 2,245,065
	ADR Silicon Motion Technology Corp.	32,236	1,313,040	1,634,688
	Alleghany Corp.	665	264,950	531,714
	American Intl Group Inc.	23,595	420,068	242,557
	Amplify Energy Corp.	23,855	133,740	157,682
	Aptargroup Inc.	2,750	162,597	317,955
	Argan Inc.	11,000	445,944	441,540
	Arrow Electr Inc.	10,389	579,439	880,364
	Avance Gas Hldgs.	62,608	1,104,169	356,241
	Avnet Inc.	11,229	442,998	476,559
	AVX Corp.	92,500	1,237,251	1,893,475
	Axcelis Technologies Inc.	21,500	380,592	518,043
	Bancfirst Corp.	7,883	474,411	492,215
	Berkley W R Corp.	4,392	109,303	303,487
	BGC Partners Inc.	203,831	1,296,317	1,210,756
	Blue Capital Reinsurance Hldgs Ltd.	12,400	85,266	85,064
	BMC Stk Hldgs Inc.	17,000	383,357	487,730
	Bowl Amer Inc.	21,900	317,449	339,450
	BW LPG Ltd.	54,888	620,493	461,288
	C H Robinson Worldwide Inc.	8,112	630,546	634,358
	Calavo Growers Inc.	8,268	627,008	748,998
	Caseys Gen Stores Inc.	2,653	241,211	421,800
	Cbiz Inc.	65,685	578,046	1,770,868
	Cheniere Energy Inc.	11,184	428,124	683,007
	Childrens PI Inc.	20,500	1,543,150	1,281,660
	Cimarex Energy Co.	8,325	621,904	436,979
	Circor Intl Inc.	11,940	519,473	552,106
	Cision Ltd.	38,764	419,936	386,477
	Clorox Co.	3,111	336,989	477,663
	Colfax Corp.	47,605	1,364,322	1,731,870
	Columbia Bkg Sys Inc.	34,388	957,805	1,399,076
	Comm Bancshares Inc.	6,266	204,440	425,739
	Community Healthcare TR INC	28,932	761,411	1,240,026
	Computer Svcs Inc.	56,000	1,108,144	2,492,000
	Cooper Tire & Rubber Co.	46,500	1,509,762	1,336,875
	Csi Properties Ltd.	3,308,200	146,513	118,881
	Davita Inc.	10,434	657,350	782,863
	Dell Technologies Inc.	552	18,233	28,367
	Dennys Corp.	47,442	689,819	943,147
	Devon Energy Corp.	18,126	605,678	470,732
	Dorian Lpg Limited.	24,106	369,041	373,161
	Eaton Corp Plc.	10,317	650,614	977,226

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

EIN: 36-4412642 Plan Number: 001

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2019

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Enerplus Corp.	90,488	1,031,129	645,179
	Ennis Inc.	33,500	635,787	725,275
	Esco Technologies Inc.	5,888	479,841	544,640
	Extended Stay Amer Inc.	47,184	866,754	701,154
	FB Finl Corp.	18,068	730,669	715,312
	First Merchants Corp.	27,792	1,194,180	1,155,869
	FLCT Loans	25,620	—	—
	Flexsteel Inds Inc.	44,000	1,474,738	876,480
	FMC Corp.	3,864	295,552	385,704
	FS KKR Capital Corp.	106,506	647,365	652,882
	Gencor Inds Inc.	62,000	856,869	723,540
	Gentex Corp.	37,000	632,847	1,072,260
	Haverty Furniture Cos Inc.	23,500	490,223	473,760
	Herman Miller Inc.	6,066	186,173	252,649
	Hooker Furniture Corp.	64,500	1,661,248	1,657,005
	Hormel Foods Corp.	4,657	147,364	210,077
	Hostess Brands Inc.	74,767	1,072,190	1,087,112
	Howard Hughes Corp.	9,582	1,005,572	1,214,998
	Hubbell Inc.	17,100	1,858,242	2,527,722
	Huntsman Corp.	73,000	1,481,668	1,763,680
	Hurco Co.	35,000	1,087,910	1,342,600
	IAA Spincor Inc.	24,878	385,800	1,170,759
	Idex Corp.	1,429	70,905	245,788
	Insteel Inds Inc.	40,000	1,093,958	859,600
	Interpublic Group.	409	4,577	9,448
	Itron Inc.	13,218	801,489	1,109,651
	J2 Global Inc.	12,516	662,237	1,172,874
	JB Financial Group.	77,772	432,183	369,206
	Johnson Outdoors Inc.	11,000	694,063	843,700
	Kaman Corp.	10,410	223,255	686,227
	Kar Auction Svcs Inc.	56,520	925,514	1,231,571
	Kulicke & Soffa Inds Inc.	50,000	1,074,857	1,360,000
	Lab Corp Amer Hldgs.	4,504	526,295	761,942
	Leggett & Platt Inc.	17,695	716,752	899,437
	Ligand Pharmaceuticals Incorporated.	12,628	1,301,398	1,316,974
	Liquefied Natural Npv.	61,020	29,724	8,150
	Lithia Mtrs Inc.	10,497	1,013,083	1,543,059
	Livent Corp.	60,851	803,376	520,276
	Lloyds Banking GP.	497,554	353,747	411,959
	Louisiana-Pacific Corp.	16,000	376,671	474,720
	M & T Bk Corp.	5,409	689,568	918,178
	Marcus & Millichap Inc.	59,500	1,734,011	2,216,375
	Masonite Intl Corp.	10,712	683,235	773,514
	Medical PPTYS TR Inc	92,297	1,097,808	1,948,390
	Mercer Intl Inc.	60,500	796,817	744,150

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

EIN: 36-4412642 Plan Number: 001

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2019

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Meredith Corp.	65,500	3,054,426	2,126,785
	MGP Ingredients Inc.	6,596	290,944	319,576
	Micron Tech Inc.	2,700	78,705	145,206
	Miller Inds Inc.	16,500	478,783	612,645
	Mohawk Inds Inc.	4,952	636,657	675,354
	MSA Safety Inc.	1,899	138,087	239,958
	MSC Indl Direct Inc.	5,800	424,874	455,126
	Mueller Wtr Prods Inc.	68,612	739,799	821,972
	National Oilwell Varco.	19,806	619,547	496,140
	National Presto Inds Inc.	19,500	1,540,659	1,723,605
	Newmark Group Inc.	38,280	367,520	515,057
	Nexstar Media Group Inc.	12,993	1,168,229	1,523,429
	Norfolk Southn Corp.	1,184	94,240	229,850
	Northern Tr Corp.	7,838	555,914	832,709
	O Reilly Automotive Inc.	1,646	352,699	721,376
	Oxford Inds Inc.	15,381	1,074,320	1,160,035
	Pac Premier Bancorp.	28,317	1,073,489	923,276
	Pacwest Bancorp.	39,057	1,534,654	1,494,711
	Pendrell Corp.	1	165,647	153,100
	Pmi Group Inc.	20,554	53,602	5,139
	Progressive Corp.	6,222	233,335	450,411
	Providence Svc Corp.	9,672	617,386	572,389
	Resources Connection Inc.	53,700	808,320	876,921
	Sanfilippo John B & Son Inc.	4,900	276,298	447,272
	Scholastic Corp.	54,500	1,886,732	2,095,525
	Shinsei Bank NPV.	64,700	1,156,960	997,216
	Silgan Hldgs Inc.	50,039	744,869	1,555,212
	Six Flags Entmt Corp.	31,784	1,354,670	1,433,776
	Smucker J M Co.	4,876	530,139	507,738
	Sonoco Prod Co.	14,285	659,111	881,670
	St Peter Port Ltd.	10,200	6,102	709
	Standard Mtr Prods Inc.	44,000	1,588,992	2,341,680
	Steris Plc.	1,794	126,229	273,441
	Teekay Corp.	156,745	1,576,454	833,883
	Teledyne Technologies Inc.	2,344	100,386	812,290
	Tractor Supply Co.	3,561	345,040	332,740
	Trinity Ind Inc.	15,304	331,465	338,984
	Valmont Inds Inc.	2,315	334,077	346,741
	Varian Medical Systems Inc.	5,914	579,368	839,847
	Verint Sys Inc.	3,470	191,134	192,099
	Verra Mobility Corp.	68,731	705,845	961,547
	Verso Corp.	82,500	1,441,240	1,487,475
	Vishay Intertechnology Inc.	38,500	630,194	819,665
	Wabtec Corp.	2,980	219,516	231,844
	Weis Mkt Inc.	17,800	783,129	720,722

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

EIN: 36-4412642 Plan Number: 001

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2019

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Wendy's Co.	23,622	415,584	524,645
	Werner Enterprises Inc.	11,348	313,660	412,954
	White Mountains Insurance Group.	696	473,737	776,395
	Williams Sonoma Inc.	5,680	291,256	417,139
	Winnebago Inds Inc.	12,500	358,216	662,250
	Zimmer Biomet Hldgs Inc.	3,771	380,527	564,443
			\$ 94,140,232	\$ 111,998,270
	Preferred stock:			
	Teekay Offshore Partners L.P.	850	\$ 16,992	\$ 17,978
			\$ 16,992	\$ 17,978
	Temporary investments:			
	Cash - interest bearing	9,421,500	\$ 9,421,500	\$ 9,421,500
			\$ 9,421,500	\$ 9,421,500
	Common / collective trusts:			
*	Northern Trust Coltv Short Term Investment Fund	41,277,739	\$ 41,277,739	\$ 41,277,739
			\$ 41,277,739	\$ 41,277,739
	Registered investment companies:			
*	MFO GMO Trust Emerging Country Debt Class III	1,320,839	\$ 36,870,050	\$ 35,847,566
	MFC Proshares Trust Short Russell 2000	11,994	730,791	442,579
	MFC Proshares Trust Short MSCI	23,624	580,855	403,025
	MFC Proshares Trust Short S&P 500	22,254	770,151	534,319
	MFC Proshares Trust Short QQQ	10,902	586,465	267,753
			\$ 39,538,312	\$ 37,495,242

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

EIN: 36-4412642 Plan Number: 001

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2019

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Hedge funds:			
	CF Arcus Japan Value Fund Absolute	40,952	\$ 11,733,938	\$ 16,168,258
	CF Arcus Japan Value Fund Relative	7,078	\$ 2,051,466	\$ 3,059,877
	CF Argos Argonaut A-Eur Fund	31,934	8,326,421	13,260,635
	CF Argos Argonaut B-Eur Fund	44,666	8,326,288	13,269,354
	CF Kingstown Partners Offshore Ltd. Class A	7,908	8,662,471	8,096,948
	CF SFP Value Realization Fund Ltd. Class B	65,993	16,429,662	30,746,264
	CF Simcoe Partners Offshore Ltd.	10,416	16,200,000	22,931,962
	CF Simcoe Ptnrs Ofshr Cl A Ser038 Dec 2019	5,000	5,000,000	5,190,000
	CF van Biema Asia Value Ltd. CL C SER 0111 FD	23,721	24,000,000	27,909,343
			\$ 100,730,246	\$ 140,632,641
	Limited partnerships:			
	Acacia Capital LP	16,200,000	16,200,000	19,106,113
	CF VV Capital SER 2016-5	7,986	8,000,000	8,372,255
	CF VV Capital SER 2016-10 FD	3,694	3,700,000	3,872,170
	MFP Partners, LP	1	1	34,383,400
	Van Biema Global Value Fund, LP	35,700,000	35,700,000	57,763,407
	VB Select European Opportunities Fund LP	10,000,000	10,000,000	10,275,652
	VB Select Pan-Asia Fund	43,225,478	43,225,478	41,491,851
			\$ 116,825,479	\$ 175,264,848
	Publicly traded partnerships:			
	MLP Rattler Midstream LP	35,994	656,166	640,333
	Viper Energy Partners LP	24,880	802,556	613,541
			\$ 1,458,722	\$ 1,253,874
	Other miscellaneous investments:			
	Defaulted MIG LLC ZERO 0% Due 12-31-2040	354,681	88,227	88,670
	In Default Pac Gas & Elec Co No-Income 0% Due 12-31-2040	325,000	308,344	340,438
	Legacy Resvs LP Corp 8 Due 12-01-2020	1,870,336	1,159,608	18,703
	Mitsubishi UFJ Inv FRN ELN CNV Sub 12/2050	700,000	497,394	486,183
			\$ 2,053,573	\$ 933,994
			\$ 405,462,795	\$ 518,296,086

Note: The above data is based upon information which has been certified by The Northern Trust Company, Trustee of the plan, as complete and accurate. Cost refers to historical cost.

*Party-in-interest.

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

EIN: 36-4412642 Plan Number: 001

Form 5500, Schedule H, Line 4j – Schedule of Reportable Transactions
Year ended December 31, 2019

(a) Identity of party involved	(b) Description of asset (include interest rate and maturity in case of a loan)	Total number of transactions		(c) Purchase price	(d) Selling price	(f) Expenses incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or (loss)
		Purchases	Sales						
Category (ii) – Series of transactions by issue in excess of 5%									
	Coltv Short Term Investment Fund	451	—	\$ 86,537,953	\$ —	\$ —	\$ 86,537,953	\$ 86,537,953	\$ —
	Coltv Short Term Investment Fund	—	309	—	78,754,688	—	78,754,688	78,754,688	—

Note: The above represents a series of transactions or single transaction in excess of 5% of the current value of plan assets at the beginning of the year. Cost refers to historical cost.

Note: The above data is based upon information which has been certified by The Northern Trust Company, trustee of the plan, as complete and accurate.

See accompanying report of independent certified public accountants.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26

Schedule of Active Participant Data as of January 1, 2019

Distribution of active participants for Salaried and non-union Hourly employees

Attained Age	Attained Years of Credited Service¹													Total
	0	1	2	3	4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25														
25-29														
30-34							1							1
35-39							14	22						36
40-44							20	36	14					70
45-49							15	44	22	4				85
50-54							13	24	29	20	1			87
55-59							6	26	26	17	15	9		99
60-64							10	12	17	8	12	11	5	75
65-69							1	2	3	2		1	4	13
70 & over								2	1	2		1		6

¹ Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM

EIN / PN: 36-4412642/001

Plan Sponsor: FMC Technologies, Inc.

Valuation Date: January 1, 2019

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26

Schedule of Active Participant Data as of January 1, 2019

Distribution of active participants for Union Hourly employees

Attained Age	Attained Years of Credited Service ²													Total
	0	1	2	3	4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25	1	0	0	0	0	0	0	0	0	0	0	0	0	1
25-29	0	0	0	0	2	2	0	0	0	0	0	0	0	4
30-34	1	1	0	1	1	2	1	0	0	0	0	0	0	7
35-39	0	0	2	0	0	5	2	0	0	0	0	0	0	9
40-44	0	1	0	0	1	3	1	0	0	0	0	0	0	6
45-49	0	2	0	0	1	9	1	0	0	0	0	0	0	13
50-54	0	1	0	0	1	3	1	0	1	0	0	0	0	7
55-59	0	0	0	0	1	5	2	0	0	3	0	0	0	11
60-64	0	0	0	0	0	5	0	0	3	4	2	3	4	21
65-69	0	0	0	0	0	1	0	0	0	0	0	0	3	4
70 & over	0	0	0	0	0	0	0	0	0	0	0	0	0	0

² Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM
 EIN / PN: 36-4412642/001
 Plan Sponsor: FMC Technologies, Inc.
 Valuation Date: January 1, 2019

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

- | | |
|-----------------------|-----------------|
| ■ Applicable month | September |
| ■ Interest rate basis | 3-Segment Rates |

Interest rates:

- | | Reflecting
Corridors | Not Reflecting
Corridors |
|---------------------------|-------------------------|-----------------------------|
| ■ First segment rate | 3.74% | 2.28% |
| ■ Second segment rate | 5.35% | 3.81% |
| ■ Third segment rate | 6.11% | 4.46% |
| ■ Effective interest rate | 5.57% | 4.05% |

Annual rates of increase

- | | |
|-------------------------------------|-----|
| ■ Compensation: | N/A |
| ■ Future Social Security wage bases | N/A |
| ■ Statutory limits on compensation | N/A |

Plan expenses

Expected administrative expenses (assumed to equal prior year administrative expenses, adjusted for current year PBGC Premiums) are included in normal cost.

Plan Name:	FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM
EIN / PN:	36-4412642/001
Plan Sponsor:	FMC Technologies, Inc.
Valuation Date	January 1, 2019

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Inclusion date The valuation date coincident with or next following the date on which the employee becomes a participant.

New or rehired employees It was assumed there will be no new or rehired employees.

Mortality

■ **Health** Separate rates for non-annuitants (based on RP-2014 "Employees" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2017) and annuitants (based on RP-2014 "Healthy Annuitants" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2017).

■ **Disabled** Separate rates for non-annuitants (based on RP-2014 "Employees" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2017) and annuitants (based on RP-2014 "Healthy Annuitants" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2017).

Termination Rates varying by age and service.

Representative Termination Rates

Attained Age	Percentage leaving during the year		
	Years of Service		
	0-1	2-4	5+
22	20.00%	15.00%	15.00%
27	20.00	15.00	11.90
32	20.00	15.00	7.30
37	20.00	15.00	7.40
42	20.00	15.00	7.30
47	20.00	15.00	6.80
52	20.00	15.00	6.70

Plan Name: FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM
 EIN / PN: 36-4412642/001
 Plan Sponsor: FMC Technologies, Inc.
 Valuation Date: January 1, 2019

SCHEDULE SB ATTACHMENTS

Disability

The rates at which participants become disabled by age and gender are shown below:

Percentage becoming disabled during the year		
Age	Males	Females
20	0.029%	0.030%
25	0.038	0.047
30	0.048	0.080
35	0.069	0.136
40	0.117	0.211
45	0.202	0.323
50	0.358	0.533
55	0.722	0.952
60	1.256	1.159
65	1.753	1.358

Retirement

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants retire by age are shown below:

Percentage retiring during the year	
Age	Rate
55	2.5%
56	2.5%
57	2.5%
58	2.5%
59	2.5%
60	5.0%
61	10.0%
62	15.0%
63	10.0%
64	10.0%
65	20.0%
66	30.0%
67	30.0%
68	40.0%
69	80.0%
70+	100.0%

Benefit commencement date:

- Preretirement death benefit

The later of the death of the active participant or the date the participant would have attained earliest commencement age.

Plan Name: FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM
EIN / PN: 36-4412642/001
Plan Sponsor: FMC Technologies, Inc.
Valuation Date: January 1, 2019

SCHEDULE SB ATTACHMENTS

- **Deferred vested** 25% of current and future deferred vested participants are assumed to commence at age 62 and 75% of current and future deferred vested participants are assumed to commence at age 65.
- **Disability benefit** Upon disablement
- **Retirement benefit** Upon termination of employment

Form of payment

Form of Payment	Single Life	50% Joint & Survivor
Active retirements	50%	50%
Future vested deferreds	50%	50%
Future disabilities	50%	50%
Future deaths	0%	100%
Current vested deferreds	50%	50%

Percent married 80% of males; 60% of females. Used to value pre-retirement surviving spouse benefits and in determining the optional forms expected to be elected at commencement

Spouse age Wife three years younger than husband.

Covered pay Not applicable. Plan accruals are frozen.

Timing of benefit payments Annuity payments are payable monthly at the beginning of the month.

Plan Name: FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM
EIN / PN: 36-4412642/001
Plan Sponsor: FMC Technologies, Inc.
Valuation Date: January 1, 2019

SCHEDULE SB ATTACHMENTS

Methods

Valuation date

First day of plan year

Funding target

Present value of accrued benefits as required by regulations under IRC §430.

Target normal cost

Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.

Actuarial value of assets for determining minimum required contributions

Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings with such expected earnings limited as described in IRS Notice 2009-22. The average asset value must be within 10% of market value, including discounted contributions receivable discounted using the effective interest rate for the 2018 plan year.

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Benefits not valued

All benefits described in the Plan Provisions section of this report were valued based on discussions with TechnipFMC regarding the likelihood that these benefits will be paid. Willis Towers Watson has reviewed the plan provisions with TechnipFMC and, based on that review, is not aware of any significant benefits required to be valued that were not.

Plan Name:	FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM
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Plan Sponsor:	FMC Technologies, Inc.
Valuation Date	January 1, 2019

SCHEDULE SB ATTACHMENTS

Sources of Data and Other Information

The plan sponsor through its third party administrator, furnished participant data as of January 1, 2019. Information on assets was supplied by Northern Trust. Information on contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made where data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. The following assumptions were made for missing or apparently inconsistent data elements:

- For newly terminated vested participants (i.e., termination dates from January 1, 2017 – January 1, 2019) where the plan administrator had not yet determined the age 65 accrued benefit reflecting final pay and service information at the time of termination, the accrued benefits were estimated by using historical pay and service received for valuation purposes.
- For a group of 4 historical terminated vested participants provided without an age 65 accrued benefit, the age 65 accrued benefit was estimated by using the average accrued benefit for similarly situated participants.
- For participants currently receiving a Joint & Survivor annuity, but missing beneficiary's date of birth, their beneficiary's date of birth was determined assuming the wife to be three years younger than husband.
- For participants currently receiving a Joint & Survivor annuity, but missing beneficiary's gender, their beneficiary's gender was determined assuming the beneficiary to be female if the participant is male and vice versa for a female participant.
- For a group of 13 rehires where the accrued benefit for service related to prior employment was not yet determined by the plan administrator, the age 65 accrued benefit was estimated by using the average accrued benefit for similarly situated participants.

We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

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Assumptions Rationale – Significant Economic Assumptions

Discount rate	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
Rates of increase in compensation	Assumed increases were chosen by the plan sponsor and represent an estimate of future experience.

Assumptions Rationale – Significant Demographic Assumptions

Healthy Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Disabled Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	Assumption was set based on historical demographic experience. This is consistent with December 31, 2013 approach with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.
Disability	Assumption was set based on historical demographic experience. This is consistent with December 31, 2013 approach with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.
Retirement	Assumption was set based on historical demographic experience. This is consistent with December 31, 2013 approach with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.
Benefit commencement date for deferred benefits	Deferred vested participants are assumed to begin benefits based on rates applied to a number of commencement ages based on an analysis of actual commencement patterns and subsidized early retirement factors for terminated vested participants.

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SCHEDULE SB ATTACHMENTS

Form of payment

The percentage of retiring participants assumed to take joint and survivor annuities, and the assumed survivor percentages, are based on historical experience with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.

Marital Assumptions:

■ Percent married

The assumed percentage married is based on the percentage married in the active population.

■ Spouse age

The assumed age difference for spouses is based on general population statistics of the age difference for married individuals of retirement age.

Source of Prescribed Methods

Funding methods

The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.

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SCHEDULE SB ATTACHMENTS

Changes in Assumptions and Methods

Change in assumptions since prior valuation

The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.

The mortality table used to calculate the funding target was updated to reflect the new tables, based on RP-2014 and subsequent Society of Actuaries studies, published by the IRS in October 2017 in regulation §1.430(h)(3)-1.

The assumed plan-related expenses added to the target normal cost were changed from \$5,348,000 to \$9,034,000.

Change in methods since prior valuation

The decrement timing used in the valuation was changed from beginning of year to rounded middle of year. Under rounded middle of year decrement timing, all decrements are assumed to occur at the middle of the year and eligibility for benefits, commencement and cessation of benefits, and other events are assumed to occur at the middle of the year. The change in funding method meets the parameters for automatic approval of software changes under IRS Rev. Proc. 2017-56.

Plan Name: FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM
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Plan Sponsor: FMC Technologies, Inc.
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**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

EIN: 36-4412642 Plan Number: 001

Form 5500, Schedule H, Line 4j – Schedule of Reportable Transactions
Year ended December 31, 2019

(a) Identity of party involved	(b) Description of asset (include interest rate and maturity in case of a loan)	Total number of transactions		(c) Purchase price	(d) Selling price	(f) Expenses incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or (loss)
		Purchases	Sales						
Category (ii) – Series of transactions by issue in excess of 5%									
	Coltv Short Term Investment Fund	451	—	\$ 86,537,953	\$ —	\$ —	\$ 86,537,953	\$ 86,537,953	\$ —
	Coltv Short Term Investment Fund	—	309	—	78,754,688	—	78,754,688	78,754,688	—

Note: The above represents a series of transactions or single transaction in excess of 5% of the current value of plan assets at the beginning of the year. Cost refers to historical cost.

Note: The above data is based upon information which has been certified by The Northern Trust Company, trustee of the plan, as complete and accurate.

See accompanying report of independent certified public accountants.

**SCHEDULE SB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2019**This Form is Open to Public
Inspection**For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019▶ **Round off amounts to nearest dollar.**▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

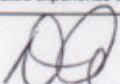
A Name of plan FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF FMC Technologies, Inc.		D Employer Identification Number (EIN) 36-4412642
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B		F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I Basic Information

1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2019</u>			
2 Assets:			
a Market value.....	2a	475,484,437	
b Actuarial value.....	2b	523,032,881	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment.....	2,672	323,367,353	323,367,353
b For terminated vested participants.....	1,053	72,142,367	72,142,367
c For active participants.....	596	94,973,949	98,743,678
d Total.....	4,321	490,483,669	494,253,398
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐			
a Funding target disregarding prescribed at-risk assumptions.....	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor.....	4b		
5 Effective interest rate.....	5	5.57%	
6 Target normal cost.....	6	9,034,000	

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

**SIGN
HERE**

Signature of actuary

9/11/2020

Date

2007493

David M Anderson

Type or print name of actuary

Willis Towers Watson US LLC

Most recent enrollment number

713-754-5400

Firm name

Telephone number (including area code)

811 Louisiana Street
Suite 2200
Houston TX 77002

Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.

Schedule SB (Form 5500) 2019
v. 190130

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:				
a Segment rates:	1st segment: 3.74 %	2nd segment: 5.35 %	3rd segment: 6.11 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22 64
23 Mortality table(s) (see instructions)	☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☒ Yes ☐ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.	☒ Yes ☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):												
a Target normal cost (line 6)	31a	9,034,000										
b Excess assets, if applicable, but not greater than line 31a	31b	9,034,000										
32 Amortization installments:	<table border="1"> <thead> <tr> <th></th> <th>Outstanding Balance</th> <th>Installment</th> </tr> </thead> <tbody> <tr> <td>a Net shortfall amortization installment.....</td> <td>0</td> <td>0</td> </tr> <tr> <td>b Waiver amortization installment</td> <td>0</td> <td>0</td> </tr> </tbody> </table>				Outstanding Balance	Installment	a Net shortfall amortization installment.....	0	0	b Waiver amortization installment	0	0
	Outstanding Balance	Installment										
a Net shortfall amortization installment.....	0	0										
b Waiver amortization installment	0	0										
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33											
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	34	0										
	Carryover balance	Prefunding balance	Total balance									
35 Balances elected for use to offset funding requirement.....	0	0	0									
36 Additional cash requirement (line 34 minus line 35).....	36	0										
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	0										
38 Present value of excess contributions for current year (see instructions)												
a Total (excess, if any, of line 37 over line 36)	38a	0										
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0										
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....	39	0										
40 Unpaid minimum required contributions for all years	40	0										

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:	
a Schedule elected	☐ 2 plus 7 years ☐ 15 years
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2019

See Schedule SB, Part V - Statement of Actuarial Assumptions/Methods for retirement rates. The average retirement age for Line 22 was calculated by determining the average age at retirement for those current active participants expected to reach retirement, based on all current decrements assumed.

x	q_x^r	l_x	${}_{x-55}p_{55} = l_x / l_{55}$	$q_x^r * l_x / l_{55}$	$x * q_x^r * l_x / l_{55}$
55	0.025	1,000,000	1.000000	0.025000	1.375000
56	0.025	975,000	0.975000	0.024375	1.365000
57	0.025	950,625	0.950625	0.023766	1.354641
58	0.025	926,859	0.926859	0.023171	1.343946
59	0.025	903,688	0.903688	0.022592	1.332940
60	0.050	881,096	0.881096	0.044055	2.643287
61	0.100	837,041	0.837041	0.083704	5.105950
62	0.150	753,337	0.753337	0.113001	7.006032
63	0.100	640,336	0.640336	0.064034	4.034119
64	0.100	576,303	0.576303	0.057630	3.688337
65	0.200	518,672	0.518672	0.103734	6.742741
66	0.300	414,938	0.414938	0.124481	8.215771
67	0.300	290,457	0.290457	0.087137	5.838177
68	0.400	203,320	0.203320	0.081328	5.530293
69	0.800	121,992	0.121992	0.097593	6.733945
70	1.000	24,398	0.024398	0.024398	1.707884

Average age at retirement	64.018061
Rounded for Schedule SB item 22	64

Plan Name:	FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM
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Plan Sponsor:	FMC Technologies, Inc.
Valuation Date	January 1, 2019

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	FMC Technologies, Inc.
EIN/PN	36-4412642/001
Plan Name	FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM
Valuation Date	January 1, 2019
Enrolled Actuary	David M Anderson
Enrollment Number	20-07493

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

The most recent amendment reflected in the following plan provisions was effective December 31, 2018.

Covered employees All salaried employees, non-union hourly employees paid on a salaried basis, or union hourly employees covered by a Collective Bargaining Agreement that specifically provides for plan participation and were vested as of January 1, 2010. Any employee hired after 2009 is excluded from coverage. Benefit accruals for all salaried participants were frozen as of December 31, 2017. Benefit accruals for all union participants were frozen as of December 31, 2018.

Participation date Covered employees enter the plan upon attainment of 1,000 hours of service within one year of their hire date.

Definitions

Vesting service Elapsed time from date of hire to the nearest month.

Pension service Elapsed time from date of plan participation to December 31, 2017 for non-union participants. Elapsed time from date of plan participation to December 31, 2018 for union participants. Note, service subsequent to these dates is reflected for determining early retirement eligibility.

Pensionable pay The amount paid in cash to a Participant for a Plan Year, excluding severance pay, certain incentive payments, taxable fringe benefits and other items specifically excluded.

Average earnings The average of the highest five consecutive calendar years of pensionable pay during the ten-year period ending on December 31, 2017.

Normal retirement date (NRD) Age 65

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SCHEDULE SB ATTACHMENTS

Monthly pension benefit

Salaried / Non-Union

One-twelfth of the sum of (a) and (b) multiplied by (c) but not less than the frozen FMC plan benefit as of December 31, 1990:

- a) 1% of final average earnings up to covered compensation plus 1.5% of final average earnings in excess of covered compensation, times pension service projected to age 65 up to a maximum of 35 years.
- b) 1.5% of final average earnings times pension service projected to age 65 in excess of 35 years.
- c) The ratio of actual pension service to expected years of pension service at age 65.

Union hourly – Smith Meter

One-twelfth of the greater of (a) or (b):

- a) Frozen benefit determined under the prior pay-related formula, if applicable.
- b) A dollar multiplier times pension service: Smith Meter – \$42 per month per year of pension service (starting January 1, 2018).

Monthly preretirement death benefit

50% of the monthly pension benefit as of the date of death, reduced for the 50% joint and survivor election and reduced for payment as early as the participant's 55th birthday.

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Plan Sponsor:	FMC Technologies, Inc.
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SCHEDULE SB ATTACHMENTS

Eligibility for Benefits

Normal retirement Retirement on NRD.

Early retirement

Salaried / Non-Union Retirement before NRD and on or after both attaining age 55 and completing ten years of pension service. For those hired before January 1, 1984, Retirement before NRD and on or after attaining age 55.

Union hourly – Smith Meter Retirement before NRD and on or after both attaining age 57 and completing ten years of pension service.

Postponed retirement Retirement after NRD.

Vested termination Termination for reasons other than death or retirement after completing five years of vesting service.

Disability

Salaried / Non-Union None provided.

Union hourly – Smith Meter Employee under age 62 is eligible upon attainment of 10 years of vesting service.

Preretirement death benefit Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse. Must be married for at least one year.

Benefits Paid Upon the Following Events

Normal retirement The monthly pension benefit determined as of NRD. For Salaried / Non-Union participants, the benefit will be increased \$1 per month for each \$120 of unwithdrawn employee contributions and interest credited to participant.

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Valuation Date: January 1, 2019

SCHEDULE SB ATTACHMENTS

Early retirement

Salaried / Non-Union

The monthly pension benefit determined as of the early retirement date, reduced by 1/3 of 1% for each month early retirement precedes the participant's 62nd birthday. The benefit will be increased \$1 per month for each \$120 of unwithdrawn employee contributions and interest credited to participant and increased by \$3 for every year that early retirement precedes NRD.

Union hourly – Smith Meter

The monthly pension benefit determined as of the early retirement date, reduced by 4% for each year retirement precedes the participant's 62nd birthday.

Postponed retirement

The monthly pension benefit determined as of the actual retirement date.

Vested termination

The monthly pension benefit determined as of the termination date, reduced 1/2 of 1% for each month benefit commencement precedes NRD.

Disablement

One-twelfth of \$58.00 times pension service reduced by worker's compensation benefits less present value of future payments on account of injury, disease, or disability under the Federal Social Security Act, payable immediately without reduction for early commencement.

Preretirement death

Amount equal to 50% of the monthly preretirement death benefit the participant would have received had he retired under a 50% joint and survivor annuity on the first of the month following his death, or his earliest commencement age, if later.

Other Plan Provisions

Forms of payment

Preretirement death benefits are payable only as described above.

■ Salaried / Non-Union

Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise,

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benefits are paid in the form of a 50% joint and survivor annuity option.

- Union hourly – All
Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of a 100% joint and survivor annuity option.
- Union hourly – Smith Meter
Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of a 50% joint and survivor annuity option.

Pension Increases None

Plan participants' contributions None

Maximum on benefits and pay All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are not assumed for determining contributions.

Future Plan Changes

Willis Towers Watson is not aware of any future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Year

Effective December 31, 2018, benefit accruals were frozen for all union participants.

Plan Name: FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM
EIN / PN: 36-4412642/001
Plan Sponsor: FMC Technologies, Inc.
Valuation Date: January 1, 2019

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

EIN: 36-4412642 Plan Number: 001

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2019

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Common stock:			
	ACI Worldwide Inc.	59,260	\$ 1,148,919	\$ 2,245,065
	ADR Silicon Motion Technology Corp.	32,236	1,313,040	1,634,688
	Alleghany Corp.	665	264,950	531,714
	American Intl Group Inc.	23,595	420,068	242,557
	Amplify Energy Corp.	23,855	133,740	157,682
	Aptargroup Inc.	2,750	162,597	317,955
	Argan Inc.	11,000	445,944	441,540
	Arrow Electr Inc.	10,389	579,439	880,364
	Avance Gas Hldgs.	62,608	1,104,169	356,241
	Avnet Inc.	11,229	442,998	476,559
	AVX Corp.	92,500	1,237,251	1,893,475
	Axcelis Technologies Inc.	21,500	380,592	518,043
	Bancfirst Corp.	7,883	474,411	492,215
	Berkley W R Corp.	4,392	109,303	303,487
	BGC Partners Inc.	203,831	1,296,317	1,210,756
	Blue Capital Reinsurance Hldgs Ltd.	12,400	85,266	85,064
	BMC Stk Hldgs Inc.	17,000	383,357	487,730
	Bowl Amer Inc.	21,900	317,449	339,450
	BW LPG Ltd.	54,888	620,493	461,288
	C H Robinson Worldwide Inc.	8,112	630,546	634,358
	Calavo Growers Inc.	8,268	627,008	748,998
	Caseys Gen Stores Inc.	2,653	241,211	421,800
	Cbiz Inc.	65,685	578,046	1,770,868
	Cheniere Energy Inc.	11,184	428,124	683,007
	Childrens PI Inc.	20,500	1,543,150	1,281,660
	Cimarex Energy Co.	8,325	621,904	436,979
	Circor Intl Inc.	11,940	519,473	552,106
	Cision Ltd.	38,764	419,936	386,477
	Clorox Co.	3,111	336,989	477,663
	Colfax Corp.	47,605	1,364,322	1,731,870
	Columbia Bkg Sys Inc.	34,388	957,805	1,399,076
	Comm Bancshares Inc.	6,266	204,440	425,739
	Community Healthcare TR INC	28,932	761,411	1,240,026
	Computer Svcs Inc.	56,000	1,108,144	2,492,000
	Cooper Tire & Rubber Co.	46,500	1,509,762	1,336,875
	Csi Properties Ltd.	3,308,200	146,513	118,881
	Davita Inc.	10,434	657,350	782,863
	Dell Technologies Inc.	552	18,233	28,367
	Dennys Corp.	47,442	689,819	943,147
	Devon Energy Corp.	18,126	605,678	470,732
	Dorian Lpg Limited.	24,106	369,041	373,161
	Eaton Corp Plc.	10,317	650,614	977,226

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

EIN: 36-4412642 Plan Number: 001

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2019

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Enerplus Corp.	90,488	1,031,129	645,179
	Ennis Inc.	33,500	635,787	725,275
	Esco Technologies Inc.	5,888	479,841	544,640
	Extended Stay Amer Inc.	47,184	866,754	701,154
	FB Finl Corp.	18,068	730,669	715,312
	First Merchants Corp.	27,792	1,194,180	1,155,869
	FLCT Loans	25,620	—	—
	Flexsteel Inds Inc.	44,000	1,474,738	876,480
	FMC Corp.	3,864	295,552	385,704
	FS KKR Capital Corp.	106,506	647,365	652,882
	Gencor Inds Inc.	62,000	856,869	723,540
	Gentex Corp.	37,000	632,847	1,072,260
	Haverty Furniture Cos Inc.	23,500	490,223	473,760
	Herman Miller Inc.	6,066	186,173	252,649
	Hooker Furniture Corp.	64,500	1,661,248	1,657,005
	Hormel Foods Corp.	4,657	147,364	210,077
	Hostess Brands Inc.	74,767	1,072,190	1,087,112
	Howard Hughes Corp.	9,582	1,005,572	1,214,998
	Hubbell Inc.	17,100	1,858,242	2,527,722
	Huntsman Corp.	73,000	1,481,668	1,763,680
	Hurco Co.	35,000	1,087,910	1,342,600
	IAA Spincor Inc.	24,878	385,800	1,170,759
	Idex Corp.	1,429	70,905	245,788
	Insteel Inds Inc.	40,000	1,093,958	859,600
	Interpublic Group.	409	4,577	9,448
	Itron Inc.	13,218	801,489	1,109,651
	J2 Global Inc.	12,516	662,237	1,172,874
	JB Financial Group.	77,772	432,183	369,206
	Johnson Outdoors Inc.	11,000	694,063	843,700
	Kaman Corp.	10,410	223,255	686,227
	Kar Auction Svcs Inc.	56,520	925,514	1,231,571
	Kulicke & Soffa Inds Inc.	50,000	1,074,857	1,360,000
	Lab Corp Amer Hldgs.	4,504	526,295	761,942
	Leggett & Platt Inc.	17,695	716,752	899,437
	Ligand Pharmaceuticals Incorporated.	12,628	1,301,398	1,316,974
	Liquefied Natural Npv.	61,020	29,724	8,150
	Lithia Mtrs Inc.	10,497	1,013,083	1,543,059
	Livent Corp.	60,851	803,376	520,276
	Lloyds Banking GP.	497,554	353,747	411,959
	Louisiana-Pacific Corp.	16,000	376,671	474,720
	M & T Bk Corp.	5,409	689,568	918,178
	Marcus & Millichap Inc.	59,500	1,734,011	2,216,375
	Masonite Intl Corp.	10,712	683,235	773,514
	Medical PPTYS TR Inc	92,297	1,097,808	1,948,390
	Mercer Intl Inc.	60,500	796,817	744,150

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

EIN: 36-4412642 Plan Number: 001

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2019

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	Meredith Corp.	65,500	3,054,426	2,126,785
	MGP Ingredients Inc.	6,596	290,944	319,576
	Micron Tech Inc.	2,700	78,705	145,206
	Miller Inds Inc.	16,500	478,783	612,645
	Mohawk Inds Inc.	4,952	636,657	675,354
	MSA Safety Inc.	1,899	138,087	239,958
	MSC Indl Direct Inc.	5,800	424,874	455,126
	Mueller Wtr Prods Inc.	68,612	739,799	821,972
	National Oilwell Varco.	19,806	619,547	496,140
	National Presto Inds Inc.	19,500	1,540,659	1,723,605
	Newmark Group Inc.	38,280	367,520	515,057
	Nexstar Media Group Inc.	12,993	1,168,229	1,523,429
	Norfolk Southn Corp.	1,184	94,240	229,850
	Northern Tr Corp.	7,838	555,914	832,709
	O Reilly Automotive Inc.	1,646	352,699	721,376
	Oxford Inds Inc.	15,381	1,074,320	1,160,035
	Pac Premier Bancorp.	28,317	1,073,489	923,276
	Pacwest Bancorp.	39,057	1,534,654	1,494,711
	Pendrell Corp.	1	165,647	153,100
	Pmi Group Inc.	20,554	53,602	5,139
	Progressive Corp.	6,222	233,335	450,411
	Providence Svc Corp.	9,672	617,386	572,389
	Resources Connection Inc.	53,700	808,320	876,921
	Sanfilippo John B & Son Inc.	4,900	276,298	447,272
	Scholastic Corp.	54,500	1,886,732	2,095,525
	Shinsei Bank NPV.	64,700	1,156,960	997,216
	Silgan Hldgs Inc.	50,039	744,869	1,555,212
	Six Flags Entmt Corp.	31,784	1,354,670	1,433,776
	Smucker J M Co.	4,876	530,139	507,738
	Sonoco Prod Co.	14,285	659,111	881,670
	St Peter Port Ltd.	10,200	6,102	709
	Standard Mtr Prods Inc.	44,000	1,588,992	2,341,680
	Steris Plc.	1,794	126,229	273,441
	Teekay Corp.	156,745	1,576,454	833,883
	Teledyne Technologies Inc.	2,344	100,386	812,290
	Tractor Supply Co.	3,561	345,040	332,740
	Trinity Ind Inc.	15,304	331,465	338,984
	Valmont Inds Inc.	2,315	334,077	346,741
	Varian Medical Systems Inc.	5,914	579,368	839,847
	Verint Sys Inc.	3,470	191,134	192,099
	Verra Mobility Corp.	68,731	705,845	961,547
	Verso Corp.	82,500	1,441,240	1,487,475
	Vishay Intertechnology Inc.	38,500	630,194	819,665
	Wabtec Corp.	2,980	219,516	231,844
	Weis Mkt Inc.	17,800	783,129	720,722

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

EIN: 36-4412642 Plan Number: 001

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2019

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Wendy's Co.	23,622	415,584	524,645
	Werner Enterprises Inc.	11,348	313,660	412,954
	White Mountains Insurance Group.	696	473,737	776,395
	Williams Sonoma Inc.	5,680	291,256	417,139
	Winnebago Inds Inc.	12,500	358,216	662,250
	Zimmer Biomet Hldgs Inc.	3,771	380,527	564,443
			\$ 94,140,232	\$ 111,998,270
	Preferred stock:			
	Teekay Offshore Partners L.P.	850	\$ 16,992	\$ 17,978
			\$ 16,992	\$ 17,978
	Temporary investments:			
	Cash - interest bearing	9,421,500	\$ 9,421,500	\$ 9,421,500
			\$ 9,421,500	\$ 9,421,500
	Common / collective trusts:			
*	Northern Trust Coltv Short Term Investment Fund	41,277,739	\$ 41,277,739	\$ 41,277,739
			\$ 41,277,739	\$ 41,277,739
	Registered investment companies:			
*	MFO GMO Trust Emerging Country Debt Class III	1,320,839	\$ 36,870,050	\$ 35,847,566
	MFC Proshares Trust Short Russell 2000	11,994	730,791	442,579
	MFC Proshares Trust Short MSCI	23,624	580,855	403,025
	MFC Proshares Trust Short S&P 500	22,254	770,151	534,319
	MFC Proshares Trust Short QQQ	10,902	586,465	267,753
			\$ 39,538,312	\$ 37,495,242

**FMC TECHNOLOGIES, INC. EMPLOYEES'
RETIREMENT PROGRAM**

EIN: 36-4412642 Plan Number: 001

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2019

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Hedge funds:			
	CF Arcus Japan Value Fund Absolute	40,952	\$ 11,733,938	\$ 16,168,258
	CF Arcus Japan Value Fund Relative	7,078	\$ 2,051,466	\$ 3,059,877
	CF Argos Argonaut A-Eur Fund	31,934	8,326,421	13,260,635
	CF Argos Argonaut B-Eur Fund	44,666	8,326,288	13,269,354
	CF Kingstown Partners Offshore Ltd. Class A	7,908	8,662,471	8,096,948
	CF SFP Value Realization Fund Ltd. Class B	65,993	16,429,662	30,746,264
	CF Simcoe Partners Offshore Ltd.	10,416	16,200,000	22,931,962
	CF Simcoe Ptnrs Ofshr Cl A Ser038 Dec 2019	5,000	5,000,000	5,190,000
	CF van Biema Asia Value Ltd. CL C SER 0111 FD	23,721	24,000,000	27,909,343
			\$ 100,730,246	\$ 140,632,641
	Limited partnerships:			
	Acacia Capital LP	16,200,000	16,200,000	19,106,113
	CF VV Capital SER 2016-5	7,986	8,000,000	8,372,255
	CF VV Capital SER 2016-10 FD	3,694	3,700,000	3,872,170
	MFP Partners, LP	1	1	34,383,400
	Van Biema Global Value Fund, LP	35,700,000	35,700,000	57,763,407
	VB Select European Opportunities Fund LP	10,000,000	10,000,000	10,275,652
	VB Select Pan-Asia Fund	43,225,478	43,225,478	41,491,851
			\$ 116,825,479	\$ 175,264,848
	Publicly traded partnerships:			
	MLP Rattler Midstream LP	35,994	656,166	640,333
	Viper Energy Partners LP	24,880	802,556	613,541
			\$ 1,458,722	\$ 1,253,874
	Other miscellaneous investments:			
	Defaulted MIG LLC ZERO 0% Due 12-31-2040	354,681	88,227	88,670
	In Default Pac Gas & Elec Co No-Income 0% Due 12-31-2040	325,000	308,344	340,438
	Legacy Resvs LP Corp 8 Due 12-01-2020	1,870,336	1,159,608	18,703
	Mitsubishi UFJ Inv FRN ELN CNV Sub 12/2050	700,000	497,394	486,183
			\$ 2,053,573	\$ 933,994
			\$ 405,462,795	\$ 518,296,086

Note: The above data is based upon information which has been certified by The Northern Trust Company, Trustee of the plan, as complete and accurate. Cost refers to historical cost.

*Party-in-interest.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 25 Change in Method

The decrement timing used in the valuation was changed from beginning of year to rounded middle of year. Under rounded middle of year decrement timing, all decrements are assumed to occur at the middle of the year and eligibility for benefits, commencement and cessation of benefits, and other events are assumed to occur at the middle of the year. The change in funding method meets the parameters for automatic approval of software changes under IRS Rev. Proc. 2017-56.

Plan Name:	FMC TECHNOLOGIES, INC. EMPLOYEES' RETIREMENT PROGRAM
EIN / PN:	36-4412642/001
Plan Sponsor:	FMC Technologies, Inc.
Valuation Date	January 1, 2019