## Edgar Filing: FMC CORP - Form 4

FMC CORP

Form 4	015										
	Detober 19, 2015 FORM 4 UNITED STATES SECURITIES AND EXCHANGE CON						COMMISSION		PPROVAL		
	Washington, D.C. 20549							Number:	3235-0287		
Check this if no longe subject to Section 16 Form 4 or	er STATEN								burden hou	Expires: January 31 2005 Estimated average burden hours per response 0.5	
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type Ro	esponses)										
CDEED C SCOTT			2. Issuer Symbol	Name and	Ticker or T	[radin	g	5. Relationship of Reporting Person(s) to Issuer			
		FMC CC	ORP [FM	C]			(Check all applicable)				
100 DOUBLE BEACH RD(Month/Da 10/15/20(Street)4. If Amer				-	insaction			X_ Director 10% Owner Officer (give title below) Dther (specify below)			
				ndment, Dat th/Day/Year)	-			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
BRANFORD	D, CT 06405							Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	ansaction Date 2A. Deer th/Day/Year) Executio any (Month/I		3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			)	SecuritiesIBeneficially0OwnedIFollowing0Reported0	6. Ownership Form: Direct D) or Indirect (I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	10/15/2015			А	32 <u>(1)</u>	А	\$0	50,890	D		

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

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1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transac	5. tiorNur	ober	6. Date Exercised Expiration D		7. Titl Amou		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(Hondr Day Tear)	any (Month/Day/Year)	Code (Instr. 8)	of Der Secu (A) Disp of (I (Ins	of (Month/Day/Year)			Under Securi	lying	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	V (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

 Relationships

 Reporting Owner Name / Address
 Director
 10% Owner
 Officer
 Other

 Director
 10% Owner
 Officer
 Other
 Other

 GREER C SCOTT
 100 DOUBLE BEACH RD
 X
 X
 X
 X

 BRANFORD, CT 06405
 X
 X
 X
 X
 X

 Signatures
 /s/ Andrea E. Utecht, as attorney in fact for C. Scott
 10/19/2015

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) These shares were issued pursuant to dividend equivalent rights in connection with vested restricted stock units held by the reporting person.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.