## Edgar Filing: RENWICK ROBIN W - Form 4

RENWICK ROBIN Form 4 July 05, 2005	W						
FORM 4 U	INITED STATES	SECURITIES AND E Washington, D.C.		COMMISSION		PPROVAL 3235-0287 January 31,	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). <b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b> <b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b> <b>Stimated a</b> burden hour response <b>Stimated a</b> <b>Stimated a</b> <b>Section 16</b> (a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section <b>30</b> (h) of the Investment Company Act of 1940							
(Print or Type Responses	)						
1. Name and Address of RENWICK ROBIN	· ·	2. Issuer Name <b>and</b> Ticker Symbol FLUOR CORP [FLR]	5. Relationship of Reporting Person(s) to Issuer				
(Last) (First C/O FLUOR CORP ENTERPRISE DRI	ORATION, ONE	3. Date of Earliest Transacti (Month/Day/Year) 07/01/2005	on	X Director		e) % Owner her (specify	
(Stree ALISO VIEJO, CA		4. If Amendment, Date Orig Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State	e) (Zip)	Table I - Non-Derivat	ive Securities A		of, or Beneficia	lly Owned	
1.Title of 2. Transac Security (Month/D (Instr. 3)	ction Date 2A. Deem bay/Year) Execution any (Month/D	Date, if TransactionAcquir Code Dispos	(A) or sed of (D) 3, 4 and 5) (A) or	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Report on a se	eparate line for each cl	info req dis	rsons who res ormation cont juired to respo	or indirectly. pond to the collec ained in this form ond unless the for htly valid OMB col	are not m	SEC 1474 (9-02)	

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	Deri
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu

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(Instr. 3)	Price of Derivative Security	(	(Month/Day/Year)	(Instr. 8		Acquired ( or Dispose (D) (Instr. 3, 4 and 5)	ed of					(Inst
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom stock units	<u>(1)</u>	07/01/2005		А		24.384		(2)	(2)	Common Stock	24.384	\$ 5

## **Reporting Owners**

Relationships						
Director	10% Owner	Officer	Other			
Х						
	07/05/2003	5				
		Director 10% Owner	Director 10% Owner Officer			

\*\*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) Phantom stock issuable on a one-to-one basis.

These phantom units were acquired under the Fluor Corporation Deferred Directors' Fees program through the crediting of dividends and are to be settled in cash upon the reporting person's termination of service as a director, death or disability in a single lump sum payment

(2) are to be setted in easin upon the reporting person's termination of service as a director, dealt of disability in a single tunp sum payment or annual installment payments over a period of two to twenty years. Units are immediately exercisable because they may be transferred into an alternative investment. However, up to 1.6 shares would be forfeited upon such transfer prior to January 1, 2010.

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.