### Edgar Filing: BARNARD RAY F. - Form 4

Form 4										
Form 4 March 08, 2013 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).							OMB APPROVAL OMB 3235-0287 Number: January 31, 2005 Estimated average burden hours per response 0.5			
(Print or Type R	esponses)									
1. Name and A BARNARD	bol	er Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
(Last) C/O FLUOR LAS COLIN	ate of Earliest Tr nth/Day/Year) 06/2013	-				(Check all applicable) <u>X</u> Director 10% Owner <u>X</u> Officer (give title Other (specify below) Sr VP, IT and Execution Svcs				
Filed(Mon			Amendment, Da d(Month/Day/Year	-	1		<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
(City)	(State)	(Zip)	Table I - Non-F	Dorivotivo	Socur	ities Aca	Person uired, Disposed of			
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)	e 2A. Deemed	3. e, if Transactio Code	4. Securi on(A) or Di (Instr. 3,	ties Ad spose 4 and (A) or	cquired d of (D) 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common Stock	03/06/2013		F <u>(1)</u>	987	D	\$ 62.75	20,671	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)

### **Reporting Owners**

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BARNARD RAY F. C/O FLUOR CORPORATION 6700 LAS COLINAS BOULEVARD IRVING, TX 75039			Sr VP, IT and Execution Svcs				
Signatures							
/s/ Eric P. Helm by Power of Attorney	03/0	8/2013					
**Signature of Reporting Person		Date					
Evenlay sting of Deene							

## **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).

Pursuant to the Issuer's 2008 Executive Performance Incentive Plan and the terms of the related award agreement, each time shares of common stock are issued upon the vesting of restricted stock units, a portion of the shares are automatically withheld by the Issuer to satisfy the resulting tax withholding obligation. In connection with the vesting of 3,603 restricted stock units held by the Reporting Person

(1) satisfy the resulting tax withholding obligation. In connection with the vesting of 3,005 resulted stock units held by the Reporting Person on 03/06/2013, the Issuer has withheld 987 shares of common stock to satisfy the resulting tax withholding obligation. The withholding of these shares occurred automatically upon the vesting of the restricted stock units, and as such, no investment decision was made by the Reporting Person in connection with this transfer.

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.