

D'Agostino Thomas P
 Form 3/A
 May 31, 2018

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 Responses)

<p>1. Name and Address of Reporting Person *</p> <p>Â D'Agostino Thomas P</p> <p>(Last) (First) (Middle)</p> <p>C/O FLUOR CORPORATION,Â 6700 LAS COLINAS BLVD</p> <p>(Street)</p> <p>IRVING,Â TXÂ 75039</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>07/14/2017</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>FLUOR CORP [FLR]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner</p> <p><input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other</p> <p>(give title below) (specify below)</p> <p>Group President</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p> <p>07/20/2017</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person</p> <p><input type="checkbox"/> Form filed by More than One Reporting Person</p>
---	---	--	--	---	--

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
------------------------------------	--	---	--

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

Edgar Filing: D'Agostino Thomas P - Form 3/A

				Shares		or Indirect (1) (Instr. 5)	
Dividend Equivalent Rights (1)	03/06/2018	^ (2)	Common Stock	104.182	\$ (2)	D	^

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
D'Agostino Thomas P C/O FLUOR CORPORATION 6700 LAS COLINAS BLVD IRVING, TX 75039	^	^	^ Group President	^

Signatures

/s/ Eric P. Helm by Power of Attorney
Date: 05/31/2018

Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) This Form 3/A is being filed to amend the Form 3 that the Reporting Person filed on July 20, 2017 to include the holding reported herein, which holding was inadvertently omitted from the original Form 3.
The dividend equivalent rights accrued in respect of performance rights (for which the performance rating was determined on February 3, 2016) when and as quarterly dividends were paid on Fluor common stock from February 23, 2015 to July 14, 2017. Each dividend equivalent right represent a contingent right to receive one share of Fluor common stock.
- (2)

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.