SEC Form 4	
------------	--

 \square

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

hours per response:	0.5
Estimated average burden	

1. Name and Address of Reporting Person* JOHNSON MARK A			2. Issuer Name and Ticker or Trading Symbol FLEETCOR TECHNOLOGIES INC [FLT]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
JOINSON	MANN A	RK A FLEETCOR TECHNOLOGIES INC [FLT] (C rst) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) (C ARKWAY 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Lin	X	Director	10% Owner				
(Last) 5445 TRIANGI	(First) LE PARKWAY	(Middle)			Officer (give title below)	Other (specify below)			
SUITE 400			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Filing	(Check Applicable			
(Street)				X	Form filed by One Repor	ting Person			
NORCROSS	GA	30092			Form filed by More than Person	One Reporting			
(City)	(State)	(Zip)							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (Fransaction Disposed Of (D) (Instr Code (Instr. 5)			(A) or	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock ⁽¹⁾	02/12/2018		G		7,173	D	\$0.00	95,318	Ι	By grantor retained annuity trust ⁽¹⁾
Common Stock ⁽²⁾	03/01/2018		Α		1,300	Α	\$0.00	96,618	D	

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

L																
	1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Date (Month/Day/Year) 3A. Deemed Execution Date, Price of Derivative Security (Month/Day/Year) (Month/Day/Year) 4. Transaction Code (Instr. 8)			5. Number of Derivative Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Expiration Date (Month/Day/Year) (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5) Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. On February 12, 2016, the reporting person contributed 25,000 shares of FLT common stock to a grantor retained annuity trust for the benefit of himself and his children. Upon termination of the trust on February 12, 2018, 7,173 of the shares were transferred to the reporting person's children via an irrevocable trust. The remaining 17,827 shares were previously distributed to the reporting person and continue to be reported in this Form 4 as directly owned.

2. Restricted stock award for 2018 director service vests 1/1/2019

Remarks:

<u>/s/ Crystal Williams, under</u> power of attorney

03/08/2018

** Signature of Reporting Person Date

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

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.