

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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                                 |           |
|--|-----------|
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|   |         |          |   |  |   |   |  |
|---|---------|----------|---|--|---|---|--|
| 1. Name and Address of Reporting Person*<br><u>Taylor Carlyn R.</u> |         |          | 2. Date of Event Requiring Statement (Month/Day/Year)<br><u>08/12/2020</u>  |  | 3. Issuer Name and Ticker or Trading Symbol<br><u>FLOWERVE CORP [ FLS ]</u> |   |  |
| (Last)  | (First) | (Middle) | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable)<br><input checked="" type="checkbox"/> Director<br>Officer (give title below) |  |   | 5. If Amendment, Date of Original Filed (Month/Day/Year)  |  |
| 5215 N. O'CONNOR BLVD.<br>SUITE 2300                                |         |          | 10% Owner   |  |   | 6. Individual or Joint/Group Filing (Check Applicable Line)<br><input checked="" type="checkbox"/> Form filed by One Reporting Person<br>Form filed by More than One Reporting Person |  |
| (Street)  | (City)  | (State)  | (Zip)   |  |   |   |  |
| IRVING  | TX      |          | 75039   |  |   |   |  |

**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) |
|---------------------------------|---|--|---|
| Common Stock                    | 0   | D  |   |

**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: Direct (D) or Indirect (I) (Instr. 5) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--|--|-----------------|---|----------------------------|--|--|---|
|  | Date Exercisable   | Expiration Date | Title   | Amount or Number of Shares |  |  |   |

Explanation of Responses:

Remarks:

/s/ Akshar C. Patel, attorney-in-fact

08/19/2020

\*\* 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 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).

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.

Section 16 Power of Attorney  
LIMITED POWER OF ATTORNEY

The undersigned hereby constitutes and appoints each of R. Scott Rowe, Lanesha Minnix, Akshar C. Patel, and Kevin S. Henderson, signing singly  
(1) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of Flowserve Corporation (the "C  
(2) do and perform any and all acts for and on behalf of the undersigned that may be necessary, desirable or appropriate to complete and execu  
(3) take any and all other action of any type whatsoever in connection with the foregoing that, in the opinion of such attorney-in-fact, may b  
The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever  
The undersigned acknowledges that the foregoing attorneys-in-fact, in serving in such capacity at the request of the undersigned, are not assu  
This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4 and 5 with respect  
The undersigned is executing this Power of Attorney on the date set forth below.

/s/ Carlyn R. Taylor  
Signature

Carlyn R. Taylor  
Print Name

August 12, 2020  
Date