FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number:

Estimated average burden hours per response: 0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					_		. ,				Company A	JI UI 194	.0	_						
1. Name and Address of Reporting Person* Shum Anthony Chun Kin					2. Issuer Name and Ticker or Trading Symbol AECOM TECHNOLOGY CORP [ACM]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Midd C/O AECOM TECHNOLOGY CORPO 555 S. FLOWER STREET, SUITE 3700				DRATION			3. Date of Earliest Transaction (Month/Day/Year) 07/14/2014									X Officer (give title Other (specify below) President, APAC				
(Street) LOS ANGELES CA 900							dment	Date	Date of Original Filed (Month/D				pay/Year) 6. Indivi Line) X			ividual or Joint/Group Filing (Che Form filed by One Reporting Form filed by More than One Person			rson	
(City)	Zip)	D	vative 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. Tra	3. Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5			5. Amount of		of y	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Cod	de V	An	mount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(
Common Stock Common Stock			_	07/14/2014				A ⁽	_	+	27.5742 70,000	A D	\$34.68 \$34.57)		
1. Title of 2. 3. Transaction Date Execurity or Exercise (Month/Day/Year) if a			able II - D (e 3A. Deemed Execution Do if any	le II - Derivativo (e.g., puts			ve Securities Ass, calls, warra ansaction de (Instr. 5. Numb of Derivativ Securitic Acquirer (A) or Dispose of (D) (Instr. 3)		Acquired, Ents, option our 6. Date Expiration (Month/Dates		posed of, or I convertible s isable and te of Se ear) Unde		eneficially ecurities) and Amount urities lying		265,368		ber of ve Owners Form: cially Direct (I or Indire (I) (Instred tition(s)		Beneficial Ownership ect (Instr. 4)	
				Co	ode	v	and 5	(D)	Date Exercis	sable	Expiration Date	Title	Amo or Num of Sha	nber						
Employee Stock Option	\$23.94								(4)		12/01/2015	Comn		372		7,37	72 D			
Restricted Stock Units	(5)								(6)		(6)	Comn		33		9,73	33	D		
Restricted Stock Units	(5)								(7)		(7)	Comn		970		17,9	70	D		
Restricted Stock Units	(5)								(8)		(8)	Comn		059		15,0	59	D		

Explanation of Responses:

- 1. Shares acquired pursuant to the AECOM Hong Kong Stock Investment Plan.
- 2. The sales in this Form 4 were made pursuant to a 10b5-1 trading plan adopted on September 13, 2013.
- 3. This transaction was executed in multiple trades at prices ranging from \$34.00 to \$35.00. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 4. The option vested in three equal annual installments beginning on December 1, 2009.
- 5. Each restricted stock unit represents a contingent right to receive one share of AECOM common stock.
- 6. The restricted stock units vest in December 2014.
- 7. The restricted stock units vest in December 2015.
- 8. The restricted stock units vest in December 2016.

Shum

** 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.