FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washing

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wasiiiigtoii, D.C. 20549	OMB APPF	≀OVAL
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-

OMB Number: 3235-0287 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 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Burke Michael S						2. Issuer Name and Ticker or Trading Symbol AECOM [ACM]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
	(Last) (First) (Middle) C/O AECOM 1999 AVENUE OF THE STARS, SUITE 2600					3. Date of Earliest Transaction (Month/Day/Year) 11/14/2016									X Officer (give title Other (specify below) Chairman & CEO					
(Street) LOS ANGELES CA 90067				_ 4. _	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)												Person					
			le I - No							, Dis	1				y Owned			1	7. Nature	
1. Title of Security (Instr. 3) 2. Tran Date (Month			Date	/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)			ties Acquired (A) or I Of (D) (Instr. 3, 4 and			5. Amount Securities Beneficiall Owned Fol Reported	y lowing	Form: I (D) or I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		e of all	
						_			Code	V	Amount	(A) or (D)	Pric	е	Transactio (Instr. 3 an	n(s) d 4)				
Common	Stock			11/14	/14/2016				S ⁽¹⁾		30,00	0 D	\$	35	83,602		D		1 24	
Common Stock														38,205.6306		I		by Merrill Lynch under AECOM Retirement & Savings Plan (RSP)		
																			(-)	
		-	Гable II -									f, or Ber			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	(e.g.,		call	s, wa	mber vative rities nired r osed)		ns, o	ble and	f, or Ber ible sec 7. Title and of Securiti Underlying Derivative (Instr. 3 and	uritie d Amou es Securit	s) nt	Owned 8. Price of Derivative Security (Instr. 5)	9. Numk derivati Securiti Benefic Owned Followin Reporte Transac (Instr. 4)	ve ies ially ng ed etion(s)	10. Ownersl Form: Direct (E or Indire (I) (Instr.	hip of In Bene Own (Inst	Nature ndirect eficial nership tr. 4)
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Explanation of Responses:

- 1. The transaction in this Form 4 was made pursuant to a 10b5-1 trading plan adopted on September 12, 2016.
- 2. Each restricted stock unit represents a contingent right to receive one share of AECOM common stock.
- 3. The stock option vests in three equal annual installments beginning on December 8, 2011.
- 4. The option becomes exercisable, if at all, beginning on March 5, 2019 subject to (A) continued employment and (B) the average daily closing price of AECOM's common stock on the New York Stock Exchange during any consecutive 20 trading day period exceeding certain price hurdles.
- 5. The restricted stock units vest in December 2016.
- 6. The restricted stock units vest in December 2017.
- $7. \ The \ restricted \ stock \ units \ vest \ in \ three \ equal \ annual \ installments \ beginning \ November \ 2017.$

/s/ Preston Hopson, Attorneyin-Fact for Michael S. Burke

<u>11/16/2016</u>

** 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.