FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number: 3235-0104							
Estimated average burden							
hours per response:	0.5						

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

1. Name and Address of Reporting Person* Finch Mary E O9/28/2015				3. Issuer Name and Ticker or Trading Symbol AECOM [ACM]							
(Last) C/O AECOM 1999 AVENU	(First) E OF THE STA	(Middle) ARS, SUITE			Relationship of Reporting (Check all applicable) Director Officer (give title)		on(s) to Issue 10% Owne Other (spe	er (5. If Amendment, Date of Original Filed (Month/Day/Year)		
2600 (Street)				X	X Sincer (give title below) EVP, CHRO	below)		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person			
LOS ANGELES	CA	90064							Form filed b Reporting P	y More than One erson	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Securi	ty (Instr. 4)					nt of Securities ally Owned (Instr. 4)	3. Ownersh Form: Direct or Indirect (Instr. 5)	cṫ (D) (II	Nature of Indirect nstr. 5)	Beneficial Ownership	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
		ate	and 3. Title and Amount of Secur Underlying Derivative Secur					6. Nature of Indirect Beneficial Ownership (Instr. 5)			
				Expiratio Date		Amount or S		Derivativ Security	e or Indirect		

Explanation of Responses:

No securities are beneficially owned.

/s/ Charles Szurgot, Attorneyin-Fact for Mary E Finch

09/28/2015

** 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.