FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940													
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Name and Address of Reporting Person* Dionisio John M					2. Issuer Name and Ticker or Trading Symbol <u>AECOM</u> [ACM]								5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Own					
(Last) (First) (Middle) C/O AECOM					3. Date of Earliest Transaction (Month/Day/Year) 06/01/2015								Office below	er (give tit	give title Other (below)		r (specify v)	
1999 AVENUE OF THE STARS, SUITE 2600				4. 1	If Ame	ndmer	nt, Date	of Origin	nal Fil	ed (Month/I		6. Individual or Joint/Group Filing (Check Applicable						
(Street) LOS ANGELES CA 90067												X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)		-									Perso				3
(=:9)	(-			on-Deriv	/ativ	e Se	curiti	ies Ad	cquire	d, D	isposed	of, or B	enefici	ially Owne	d			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			2. Transac	tion 2A. De Execu- y/Year) if any		. Deem	Deemed ecution Date, ny onth/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,		5. Amoun Securities Beneficia Owned Fo	t of	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	Transacti	Reported Transaction(s) (Instr. 3 and 4)					
			06/01/2015					S ⁽¹⁾	S ⁽¹⁾	10,000) D	\$33.0	01 104,	104,948			by John M Dionisio Family Irrevocable Trust	
Common Stock													61,3	352	I)		
Common Stock												87,958	3.4566	4566 I		by Merrill Lynch under AECOM Retirement & Savings Plan (RSP)		
		•	Table II								posed o			lly Owned				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Executity or Exercise (Month/Day/Year) if any		3A. Deer Execution if any (Month/E	med 4. on Date, Transa		5. Number of		6. Date Exercis Expiration Dat (Month/Day/Ye		sable and	7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Owners Form: Direct (I or Indire (I) (Instr	Benefic Owners ct (Instr. 4	
					Code	v	(A)		Date Exercisa		Expiration Date	Title	Amount or Number of Share	r				
Employee Stock Option	\$24.45								(2)		12/02/2016	Common Stock	145,34	49	145	5,349	D	
Employee Stock Option	\$27.54								(3)		12/08/2017	Common Stock	4,083	3	4,	083	D	
Restricted Stock Unit	(4)								(5)		(5)	Common Stock	107,90	03	107	7,903	D	
Restricted Stock Unit	(4)								(6)		(6)	Common Stock	84,20	9	84	,209	D	
Restricted Stock Unit	(4)								(7)		(7)	Common Stock	4,32	7	4,	327	D	

Explanation of Responses:

- $1. \ The \ sale \ in \ this \ Form \ 4 \ was \ made \ pursuant \ to \ a \ 10b5-1 \ trading \ plan \ adopted \ on \ December \ 4, \ 2014.$
- 2. The options vested in three equal annual installments beginning on December 2, 2010.
- 3. The options vested in three equal annual installments beginning on December 8, 2011.
- 4. Each restricted stock unit represents a contingent right to receive one share of AECOM common stock.
- 5. The restricted stock units vest in December 2015.
- 6. The restricted stock units vest in December 2016.
- 7. The restricted stock units vest on the earlier of March 4, 2016 or the date of the Corporation's 2016 Annual Meeting of Stockholders.

in-Fact for John M. Dionisio

** 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.