

## DARDEN RESTAURANTS INC

# Reported by **ATKINS M SHAN**

## FORM 4

(Statement of Changes in Beneficial Ownership)

# Filed 11/13/14 for the Period Ending 11/11/14

Address 1000 DARDEN CENTER DRIVE

ORLANDO, FL 32837

Telephone 4072454000

CIK 0000940944

Symbol DRI

SIC Code 5812 - Eating Places

Industry Restaurants

Sector Services

Fiscal Year 05/31





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

### UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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#### STATEMENT OF CHANGES IN 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

1. Name and Address of Reporting Person *				2. ]	2. Issuer Name and Ticker or Trading Symbol							g Syn	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
ATKINS M SHAN					DARDEN RESTAURANTS INC [ DRI ]								<b>X</b> Direc	X Director 10% Owner				
(Last)	(First)	(Midd	lle)	3. ]	3. Date of Earliest Transaction (MM/DD/YYYY)					Officer below)	(give title l	Other (specify						
1000 DARDEN CENTER DRIVE					11/11/2014													
(Street)												d	6. Individual or Joint/Group Filing (Check Applicable Line)					
ORLANDO, I	FL 3283	7												T 70 (**				
(City) (State) (Zip)														X _ Form filed by One Reporting Person _ Form filed by More than One Reporting Person				
		Table I	- Non-D	eriva	tiv	e Securi	ties	Acq	uire	d, D	ispos	ed of	f, or	Beneficially	Owned			
			2. Tran Date			3. Trans. Code (Instr. 8)		A D	4. Securities Acquired (A) of Disposed of (D (Instr. 3, 4 and (A) or		or   F	Follov	oount of Securitie ving Reported Tr 3 and 4)	es Beneficially Owned ransaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr.	Beneficial Ownership	
							(	Code	V A	mount	(D) F	Price					4)	
Common Stock														360.0000			D	
Tab	le II - Dei	rivative S	Securitie	s Ben	ıefi	cially Ov	vne	ed ( <i>e</i> .	g.,	puts	, calls	s, wa	rra	nts, options,	convert	ible secur	ities)	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date	3A. Deemed Execution Date, if any	4. Trans Code (Instr. 8)		Number of Derivative Securities Acquired (A) or Disposed of (D) Instr. 3, 4 and		6. Date Exercisable and Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Underlying Security	Derivative	derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	Beneficial	
				Code	v	(A)	(D)	Date Exerc	isable		ration	Title		Amount or Number of Shares		Transaction (s) (Instr. 4)	4)	
Restricted Stock Units	(1)	11/11/2014		A		2086.0000		(	2)		(2)	Com		2086.0000	\$0.0000	2086.0000	D	
Stock Option (Right to Buy)	\$55.7200	11/11/2014		A		2776.0000		(	3)	11/1	1/2024	Comi		2776.0000	\$0.0000	2776.0000	D	

#### **Explanation of Responses:**

- (1) The actual conversion rate is 1-for-1.
- (2) The RSUs vest on the first to occur of one year from date of grant and the date of the next annual meeting of shareholders.
- (3) The options vest on the first to occur of one year from date of grant and the date of the next annual meeting of shareholders.

**Reporting Owners** 

Paparting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10%	Owner	Officer	Other				
ATKINS M SHAN 1000 DARDEN CENTER DRIVE	X								
ORLANDO, FL 32837									

Bruce A. Brown, Attorney-in-fact for Atkins, M. Shan

11/13/2014

\*\* 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 control number.