SECURITIES AND EXCHANGE COMMISSION

FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: 1999-09-10 | Period of Report: 1999-08-31 SEC Accession No. 0000940944-99-000081

(HTML Version on secdatabase.com)

SUBJECT COMPANY

DARDEN RESTAURANTS INC

CIK:940944| IRS No.: 593305930 | State of Incorp.:FL | Fiscal Year End: 0526

Type: 4 | Act: 34 | File No.: 001-13666 | Film No.: 99708943

SIC: 5812 Eating places

Mailing Address 5900 LAKE ELLENOR DRIVE 5900 LAKE ELLENOR DR ORLANDO FL 32809

Business Address ORLANDO FL 32809 4072454000

REPORTING OWNER

BURKE DANIEL B

CIK:1018386 Type: 4

Mailing Address 1150 15TH ST NW WASHINGTON DC 20071

C/O THE WASHINTON POST 1150 15TH ST NW WASHINGTON DC 20071 2029946694

Business Address

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[] Check this box if no longer Subject

to Section 16.

U.S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

|-----|OMB Number 3235-02871 |Expires: September 30,1998| |Estimated ave. burden |hours per response....0.5|

OMB APPROVAL

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or

Section 30(f) of the Investment Company Act 1940

._____ |1.Name and Address of Reporting Person* |2.Issuer Name and Ticker or Trading Symbol |6.Relationship of Reporting Person to | | Issuer (Check all Applicable) | BURKE DANIEL B. | DARDEN RESTAURANTS, INC. | of Reporting Person | Year |---(give title below) ---(Specify below)| | X Director 10% Owner (First) (MI) |3.IRS or Soc. Sec. No. |4.Statement for Month/ | Officer Other | of Reporting Person | Year |---(give title below) --- (Specify below) | 5900 LAKE ELLENOR DRIVE | (Voluntary) P. O. BOX 593330 August 1999 (Street) |5.If Amendment, Date of |7. Individual or Joint/Group Filing | Original (Month/Year) | (Check Applicable Line) FL 32859-3330| | X Form filed by One Reporting Person Form filed by More than One |--- Reporting Person (City) (State) (Zip) TABLE I - Non-Derivative Securities Acquired, Disposed of or Beneficially Owned |1.Title of Security |2.Transac- |3.Trans. |4.Security Acquired (A) or |5.Amount of | 16. | 7.Nature of Indirect| | tion Date | Code | Disposed of (D) | Securities | Own. | Beneficial | (Mon/Day/Yr) | (Instr. 8) | (Instr. 3, 4 & 5) | Beneficially | Form | Ownership (Instr. 3) --| Owned at End of | (D) | (Instr. 4) | (A) | | Month Amount | (D) | Price 1 lor I |Code| V | |(D) | Price | (Instr. 3 & 4) |(I) | |<S> | 08/25/1999 | J | | ICommon Stock | (01) | - 1

Reminder: Report on a separate line for each class securities owned directly or indirectly.

*If the form is filed by more than one reporting person, see Instruction $4\left(b\right)\left(v\right)$.

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</TABLE>

<TABLE> <CAPTION> FORM 4 (continued)

TABLE II - Derivative Securities Acquired, Disposed of, Beneficially Owned (e.g., puts, calls, warrants, options, convertible security)

Derivative Security (Instr. 3)	sion or Exercise Price of Deriva-	Trans Date (Mon/ Day/ Year) 	saction Code (Instr.8) 		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 & 5)		Exercisable and Expiration Date (Month/Day/ Year)		of Underlying Securities (Instr. 3 & 4)		i I I	of Derivative Securities Benefi- cially Owned at	Own. Form of Deri	of Indirect Beneficial Ownership (Instr. 4)
							Exbl.	_	Title	Shares		(Instr. 4)	or Ind. (I)	i i
<s> </s>	<c></c>	 <c></c>	 <c></c>					 <c> </c>	 <c> </c>	 <c> </c>	 <c></c>		 <c></c>	
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Explanation of Responses:

(01) The Reporting Person elected to receive a portion of the quarterly Director's compensation in stock issuable under the D arden Restaurants, Inc. Compensation Plan for Non-Employee Directors. Shares are valued and issued at the end of eac h quarter.

**Intentional	misstatements	or	omissi	ons o	f fa	cts	consti	tute	Federal
Criminal Vio	olations. See	18	U.S.C.	1001	and	15	U.S.C.	78f1	Ē(a).

/s/Clifford L. Whitehill 09/09/1999

**Signature of Reporting Person Date

Note: File three copies of this form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure.

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Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMD Number

BURKE, DANIEL B. DARDEN RESTAURANTS, INC. AUG-1999 PAGE: 2 OF 2 </TABLE>