## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL										
l	OMB Number:	3235-0287									
l	Estimated average burden										
l	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

1. Name and Address of Reporting Person* <u>Furman Matthew</u>					2. Issuer Name and Ticker or Trading Symbol WILLIS TOWERS WATSON PLC [ WLTW ]								(Checl	ationship of F k all applicab Director	10% Ow	ner			
(Last) (First) (Middle) C/O WILLIS GROUP LIMITED 51 LIME STREET					3. Date of Earliest Transaction (Month/Day/Year) 07/11/2018								X	X Officer (give title Other (specify below)  General Counsel					
(Street) LONDON X0 EC3M 7DQ					4. If Amendment, Date of Original Filed (Month/Day/Year)							I	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(City)	(5	State)	(Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Trans Date (Month/			ate		Executio if any	2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Following	y Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct Indirect Err. 4)	7. Nature of Indirect Beneficial Ownership		
							(	Code	/ Amount			A) or D)	Price	Reported Transaction (Instr. 3 and				nstr. 4)	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (AD Disposed of (D) (Instr. 3 and 5)	rivative curities (Misposed of (Instr. 3, 4		6. Date Exercisable and Expiration Date (Month/Day/Year)		e and	7. Title and Amour Securities Underly Derivative Security 3 and 4)		rlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Code	v	(A)	(D)	Date Exerc	cisable		iration	Title		Amount or Number of Shares		Transact (Instr. 4)	ion(s)		
Restricted Share Unit	(1)	07/11/2018		A		17.7566 <sup>(2)</sup>		ı	(1)		(1)	Ordin Share nominal \$0.00030 per sh	es, value 04635	17.7566	\$156.91	270.65	535	D	

## **Explanation of Responses:**

1. Vested shares under the Willis Towers Watson Non-Qualified Stable Value Excess Plan for U.S. Employees settle for Ordinary Shares, nominal value \$0.000304635 per share, on a 1:1 basis on the first business day of the month on which the NASDAQ Stock Market is open for business following the earlier of (i) the date that is 6 months after the reporting person's separation from service and (ii) the date that is 30 days after the

2. Includes restricted share units acquired pursuant to the participant's deferral election under the Willis Towers Watson Non-Qualified Stable Value Excess Plan for U.S. Employees.

/s/ Matthew Furman by Elaine Wiggins, Attorney-in-Fact (power of attorney previously filed)

07/13/2018

Date

\*\* Signature of Reporting Person

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.