FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APP	ROVAL
OMB Number:	3235-028

0.5

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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>HALEY JOHN J</u>					2. Issuer Name and Ticker or Trading Symbol WILLIS TOWERS WATSON PLC [ WLTW ]								5. Rela (Check	Relationship of Reporting Person(s) to Issu (Check all applicable)     X Director 10% C				er
(Fig. 4511)													X	Officer (give title below)			Other (sp	ecify
(Last) (First) (Middle) C/O WILLIS GROUP LIMITED 51 LIME STREET					3. Date of Earliest Transaction (Month/Day/Year) 10/18/2017									,	ef Execu	tive O	,	
(Street) LONDON X0 EC3M 7DQ				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indiv	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person						
(City)	(:	State)	(Zip)															,
			Table I - Non	-Deriv	ative	Securitie	es A	cqu	ired, D	Disp	osed	of, or Bene	ficially O	wned				
1. Title of Security (Instr. 3)		[1	2. Transaction Date (Month/Day/Year)		Execution if any	2A. Deemed Execution Date if any (Month/Day/Ye		Code (Instr.		4. Secu Dispos	rities Acquired ( ed Of (D) (Instr. 3	A) or 3, 4 and 5)	5. Amount of Securities Beneficially Following R	Owned ( eported (			Nature of direct eneficial wnership	
									Code	/	Amoun	(A) or (D)	Price	Transaction (Instr. 3 and				Instr. 4)
			Table II - [	Deriva e.g., p	tive S	Securities calls, war	Ac ran	quir ts, o	ed, Dis	spo s, co	sed o	f, or Benefic	cially Ow	ned				
1. Title of Derivative Security (Instr. 3)	Conversion Date Exe or Exercise (Month/Day/Year) if ar		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (A) Disposed of (Instr. 3, 4 at 5)	Expi	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exer	e rcisable	Exp Date	iration e	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			
Restricted Share Unit	(1)	10/18/2017		A		113.1923 <sup>(2)</sup>		(1)		(1)		Ordinary Shares, nominal value \$0.000304635 per share	113.1923	\$159.8 100,103		0055	D	
Restricted Share Unit	(1)	10/18/2017		A		66.0288 <sup>(3)</sup>		(1)		(1)		Ordinary Shares, nominal value \$0.000304635 per share	66.0288	5.0288 \$0		69.0343 D		

## **Explanation of Responses:**

- 1. Restricted share units settle for Ordinary Shares, nominal value \$0.000304635 per share, on a 1:1 basis 6 months after the reporting person's termination date.
- 2. Includes restricted share units acquired pursuant to the participant's deferral election under the Willis Towers Watson Non-Qualified Deferred Savings Plan for US Employees (the "Plan").
- 3. Includes restricted share units acquired pursuant to the Company's matching contribution on the participant's deferral election pursuant to the terms of the Plan and credited to the participant's account in the forms of restricted share units under the Plan.

/s/ John J. Haley by Elaine Wiggins, Attorney-in-Fact (power of attorney previously filed)

10/20/2017

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.