FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.

0.00540	-
C. 20549	OMB APPROVAL

ı	OMB Number: Estimated average burden	3235-0287
ı	Estimated average burden	

0.5

hours per response:

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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>Hess Carl Aaron</u>				2. Issuer Name and Ticker or Trading Symbol WILLIS TOWERS WATSON PLC [WLTW]							(Checl	ationship of F k all applicab Director Officer (q	ıle)	Person	(s) to Issue 10% Ov Other (s	vner		
(Last)	(Last) (First) (Middle) C/O WILLIS GROUP LIMITED				3. Date of Earliest Transaction (Month/Day/Year) 04/08/2019							_ X	X Officer (give title Other (specify below) Head of IRR					
51 LIME STREET					0.1100120120													
(Street)	N X	02	EC3M 7DQ	-	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi	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)										1 om met	a by Worc	than O	пс героп	ng i cison	
			Table I - Non-	Deriva	ative	Securitie	s A	cquired, [Disp	osed	of, or Bene	ficially C	wned					
1. Title of Security (Instr. 3)		tr. 3)	0	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Da if any (Month/Day/Y		Code (Ir				5. Amount of Securities Beneficially Following	·	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amoun	mount (A) or (D)		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
			Table II - D (e								f, or Benefi		vned					
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 (A Disposed of (D) (Instr. 3 and 5)	ivative curities quired (A) or posed of (Instr. 3, 4		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Al Securities Un Derivative Se 3 and 4)			lerlying	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficie Owned Followin Reported Transact	e Ownersh s Form: ally Direct (D or Indire g (I) (Instr.		Beneficial Ownership ct (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Exp Dat	oiration te	Title	Amount or Number of Shares		(Instr. 4)	ion(s)			
Restricted Share Unit	(1)	04/08/2019		A		147.095 ⁽²⁾		(1)		(1)	Ordinary Shares, nominal value \$0.000304635 per share	147.095	\$178.45	3,407.3	3408	D		
Restricted Share Unit	(1)	04/08/2019		A		85.8054 ⁽³⁾		(1)		(1)	Ordinary Shares, nominal value \$0.000304635	85.8054	\$0	3,493.1	1462	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 form of restricted share units under the Plan.

/s/ Carl A. Hess by Elaine Wiggins, Attorney-in-Fact (power of attorney previously filed)

04/10/2019

** 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.