FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

aton D.C. 20540	
gton, D.C. 20549	OMB APPROVAL

OMB Number:	3235-0287
Estimated average burden	

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP hours per response: 0.5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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Name and Address of Reporting Person* Pullum Anne					2. Issuer Name and Ticker or Trading Symbol WILLIS TOWERS WATSON PLC [WLTW]									Relationship of Reporting Person(s) to Issuer (Check all applicable)					
				- 1										Director			10% Ow		
														X Officer (give title below)			Other (specify below)		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)								, ,	Head of Western Europe				
C/O WILLIS GROUP LIMITED					11/07/2019									Head of Western Europe					
51 LIME STREET																			
(Street)														6. Individual or Joint/Group Filing (Check Applicable Line)					
LONDO	N X	.0	EC3M 7DQ											Y Form file	ed by One	Report	ting Person		
,														Form file	ed by More	e than (One Reporti	ng Person	
(City)	(9	State)	(Zip)		. S see by more than one responding t														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transc Date (Month/E				te	action ZA. Deemed Execution Date if any (Month/Day/Yea			e, T	Transaction Dispose Code (Instr.		urities Acquired (A) o sed Of (D) (Instr. 3, 4 a		Beneficial Owned Fo	s For ally (D) ollowing (I) (Direct II Indirect E tr. 4) C	7. Nature of Indirect Beneficial Ownership		
				G				Code V	/ Amount		(A) or (D)	Price	Reported Transactio (Instr. 3 ar	n(s) d 4)			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.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)			and	7. Title and Amou Securities Underly Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exerc	cisable	Expir Date		Title	Amoun or Numbe of Shares		(Instr. 4)	1011(5)			
Restricted Share Unit	(1)	11/07/2019		A		9.2413 ⁽²⁾			(1)	(1	1)	Ordinary Shares, nominal value \$0.000304635 per share	9.241	\$0	221.3	77	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 reporting person's death.
- 2. Includes restricted share units credited to the participant's account by the Company pursuant to the Willis Towers Watson Non-Qualified Stable Value Excess Plan for U.S. Employees (the "Plan") accrual formula, net of the units acquired pursuant to the participant's deferral election under the Plan.

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

11/11/2019

** 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.