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FORM 4

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL					
OMB Number:	3235-0287				
OWB Number:	3235-026				

OMB NUMber:	3235-0287	
Estimated average burden	0.5	
hours per response:	0.5	

Section obligat	this box if no lo n 16. Form 4 or ions may conti tion 1(b).			Estimated average burden											3235-0287 0.5		
1. Name and Address of Reporting Person* Pullum Anne (Last) (First) (Middle) C/O WILLIS GROUP LIMITED 51 LIME STREET					2. Issuer Name and Ticker or Trading Symbol <u>WILLIS TOWERS WATSON PLC</u> [WLTW] 3. Date of Earliest Transaction (Month/Day/Year) 05/08/2019								k all applicable) Director		orting Person(s) to Issuer 10% Owne title Other (spe below)		wner
													Head of Strategy and			,	
(Street) LONDO	N X	K0	EC3M 7DQ		4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Indiv X	 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-					· ·	<u>.</u>	,		-	-				
1. Title of Security (Instr. 3)		12	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date if any (Month/Day/Ye		3.	4. Secu	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amount o	Beneficially Owned Collowing		nership	7. Nature of Indirect Beneficial Ownership	
1. Title of S	Security (Ins	tr. 3)	1	Date		Executio if any		Code (In:	ion Dispos) (Instr. 3	3, 4 and 5)	Following		Form:	Direct Indirect	Beneficial Ownership
1. Title of S	Security (Ins	tr. 3)	1	Date		Executio if any		Code (In:	ion Dispos str.	ed Of (D) (Instr. 3 (A) or (D)	3, 4 and 5) Price	Beneficially	v Owned	Form: (D) or I	Direct Indirect	Beneficial
1. Title of S	Security (Ins	ur. 3)	Table II - D	Date Month/E	Day/Year)	Executio if any (Month/D	Acc	Code (In: 8) Code	ion Dispos str. Amour sposed o	nt f, or E	(A) or (D) Benefic	Price cially Ow	Beneficially Following Reported Transaction (Instr. 3 and	v Owned	Form: (D) or I	Direct Indirect	Beneficial Ownership
1. Title of 5 1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Table II - D	Date Month/E	Day/Year) tive Se uts, ca action (Instr.	Executio if any (Month/D	Acq rants	Code (In: 8) Code	Dispos Manual Disposed Amour Sposed o , Converti isable and tte	tible s	(A) or (D) Benefic securit and Am ities Und	Price cially Ow ies)	Beneficially Following Reported Transaction (Instr. 3 and	v Owned	Form: (D) or I (I) (Inst per of ve es ially ng id	Direct Indirect	Beneficial Ownership (Instr. 4) 11. Nature p of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

05/08/2019

(1)

Restricted

Share Unit

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.

(1)

(1)

Title Ordinary Shares, nominal value \$0.000304635

per share

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

05/10/2019

175.9591

D

Date

** Signature of Reporting Person

20.7615

\$<mark>0</mark>

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

 \ast 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.

20.7615⁽²⁾

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