Edgar Filing: Barns Dwight - Form 4

Barns Dwig	ht										
Form 4											
December 0	6, 2017										
FORM	ΛΔ							OMB AF	PROVAL		
	UNITED ST.					GE C	OMMISSION	OMB	3235-0287		
Check th	uis hox	Was	shington,	D.C. 2054	9			Number:			
if no lon							Expires:	January 31, 2005			
	subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNERSHI				verage		
Section		SECURITIES						burden hour			
Form 4 o Form 5		at to Section 1	6(a) of th	a Saguritia	Evo	hongo	A at of 1024	response	0.5		
obligatio	-	nt to Section 1				-	1935 or Section	h			
may con	lunue.	30(h) of the In	•	v .	•			1			
<i>See</i> Instr 1(b).	ruction		vestment	Company		1 1 7 7	0				
1(0).											
(Print or Type	Responses)										
1. Name and Address of Reporting Person [*] _ 2. Issuer Name and Ticker or Trading 5. Rela						5. Relationship of	Reporting Person(s) to				
Barns Dwig	ght	Symbol	ymbol				Issuer				
Nie			Nielsen Holdings plc [NLSN]				(Check all applicable)				
(Last)	(First) (Midd	e) 3. Date of	f Earliest Tı	ansaction			(Cheel	k an applicable)		
					X Director						
C/O NIELSEN HOLDINGS PLC, 85 12/05/20				017 <u>X</u> Officer (give below)				e title Other (specify below)			
BROAD STREET				· · · · · · · · · · · · · · · · · · ·					Executive Officer		
	(Street)	4. If Ame	endment, Da	te Original			6. Individual or Jo	int/Group Filin	g(Check		
	onth/Day/Year)				Applicable Line)						
X Form filed by							One Reporting Person				
NEW YOR	K, NY 10004						Form filed by M Person	lore than One Re	porting		
(City)	(State) (Zip				• . •						
		1401				_	iired, Disposed of		-		
1.Title of	2. Transaction Date 24 (Month/Day/Year) Ex		3. Terrereti	4. Securities	-		5. Amount of Securities	6. Orana analain	7. Nature of		
Security (Instr. 3)	ecution Date, if	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Beneficially	Ownership Form: Direct	Indirect Beneficial			
	ear) (Instr. 8)			Owned	(D) or	Ownership					
							Following	Indirect (I)	(Instr. 4)		
					(A)		Reported Transaction(s)	(Instr. 4)			
					or	р.	(Instr. 3 and 4)				
Common			Code V	Amount 1,382.11	(D)	Price					
Stock	12/05/2017		А	1,362.11 (1)	А	\$0	349,937.95	D			
STOCK											

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
Barns Dwight C/O NIELSEN HOLDINGS PLC 85 BROAD STREET NEW YORK, NY 10004	Х		Chief Executive Officer					
Signatures								
/s/ Emily Epstein, Authorized Signatory		12/06/2017						
**Signature of Reporting Person		Date						

Explanation of Responses:

- * 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).
- (1) Represents dividend equivalent rights in connection with the Issuer's quarterly dividend and accrued to the reporting person on restricted stock units.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.