Edgar Filing: Nielsen Holdings plc - Form 4

| Nielsen Hold | ings plc | | | | | | | | | | | |
|---|---|-------------|--|---|------|--|--------------------|----------|---|--|---|--|
| Form 4 | | | | | | | | | | | | |
| March 21, 20 | 16 | | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | | | PPROVAL | | |
| | UNITED S | STATES : | | | | ND EXC D.C. 205 | | NGE (| COMMISSION | OMB Number: | 3235-0287 | |
| Subject to Section 16. Form 4 or | | | | GES IN BENEFICIAL OWNERSHIP O SECURITIES | | | | | | Expires:January 31 2005Estimated average burden hours per response0.5 | | |
| Form 5 obligation may conti <i>See</i> Instru 1(b). | nue. Section 17(a | a) of the P | | ility Ho | oldi | ng Com | pany | Act o | ge Act of 1934, f 1935 or Sectio 40 | n | | |
| (Print or Type R | esponses) | | | | | | | | | | | |
| Dale Eric J Syn | | | 2. Issuer Name and Ticker or Trading Symbol Nielsen Holdings plc [NLSN] | | | | | g | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | | Date of Earliest Transaction | | | | | (Check all applicable) | | | |
| (Month | | | | Month/Day/Year) 3/17/2016 | | | | | Director 10% Owner X_ Officer (give title Other (specify below) below) Chief Legal Officer | | | |
| | | | | Amendment, Date Original I(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| NEW YORK | K, NY 10004 | | | | | | | | | Aore than One Re | | |
| (City) | (State) | (Zip) | Table | e I - Non | -De | rivative S | Securi | ties Aco | quired, Disposed of | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | n Date, if | 3. Transac Code (Instr. 8 Code | 8) | 4. Securi nAcquired Disposed (Instr. 3, Amount | l (A) o l of (D |) | Securities Beneficially | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 03/17/2016 | | | А | | 47.62 (1) | А | \$0 | 9,033.71 | D | | |

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)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|-------|--|---|---|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Address | s Relationships | | | | | | | |
|---|-----------------|-----------|---------------------|-------|--|--|--|--|
| reporting o when I take / I take oo | Director | 10% Owner | Officer | Other | | | | |
| Dale Eric J C/O NIELSEN 85 BROAD STREET NEW YORK, NY 10004 | | | Chief Legal Officer | | | | | |
| Signatures | | | | | | | | |
| /s/ Harris Black, Authorized Signatory | | 03/21/20 | 16 | | | | | |
| **Signature of Reporting Person | | Date | | | | | | |
| Evaluation of Poenoneoe: | | | | | | | | |

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.