Edgar Filing: Nielsen Holdings plc - Form 4

| Nielsen Hole | dings plc | | | | | | | | | | |
|--|---|-------------------|---|---|--------|---------|--|---|------------------------|--|--|
| Form 4 June 17, 201 | 6 | | | | | | | | | | |
| | ЛЛ | | | | | | | | PPROVAL | | |
| FORM | UNITED | STATES SECU Wa | RITIES A shington, | | | IGE (| COMMISSION | OMB Number: | 3235-0287 | | |
| Check this box | | | | GES IN BENEFICIAL OWNERSHIP SECURITIES | | | | Expires: Estimated a burden hou response | irs per | | |
| Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | | |
| (Print or Type] | Responses) | | | | | | | | | | |
| Hasker Stephen Symbol | | | suer Name and Ticker or Trading ol sen Holdings plc [NLSN] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| (Last) | (First) (M | Middle) 3. Date | 3. Date of Earliest Transaction | | | | (Check all applicable) | | | | |
| (Month/Da C/O NIELSEN HOLDINGS PLC, 85 06/16/20 BROAD STREET | | | | nth/Day/Year) 16/2016 | | | | Director 10% Owner X Officer (give title Other (specify below) below) Global President | | | |
| | | | nendment, Date Original (onth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| NEW YOR | K, NY 10004 | | | | | | | Iore than One Re | | | |
| (City) | (State) | (Zip) Tal | ole I - Non-D | Perivative S | ecurit | ies Acq | uired, Disposed of | , or Beneficial | lly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Data (Month/Day/Year) | | Code | on(A) or Di (D) (Instr. 3, - | sposed | of | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Indirect Beneficial | | |
| Common Stock | 06/16/2016 | | А | 387.95 (1) | А | \$0 | 104,473.67 | 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | ınt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne 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 | Relationships | | | | | | |
|---|---------------|-----------|------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Hasker Stephen C/O NIELSEN HOLDINGS PLC 85 BROAD STREET NEW YORK, NY 10004 | | | Global President | | | | |
| Signatures | | | | | | | |
| /s/Harris Black, Authorized Signatory | 06 | /17/2016 | | | | | |
| **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.