Edgar Filing: Charlton Jeffrey - Form 4

Charlton Isffr

Charlton Jef	frey											
Form 4												
October 31,	2017											
FORM	ΠΛ								OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB	2025 0007		
<i>.</i>			Was	shington,	D.C. 20	549			Number:	3235-0287		
Check th									Expires:	January 31,		
	if no longer subject to STATEMENT OF CHAN				BENEF	ICIA	LOW	NERSHIP OF		2005 d average		
Section		:							Estimated average burden hours per			
Form 4 of	or							response 0.5				
Form 5	Filed	pursuant to Se	ection 1	6(a) of the	e Securit	ies E	xchange	e Act of 1934,				
obligatic may con		17(a) of the Pu	ublic Ut	ility Hold	ling Con	npany	Act of	1935 or Section	1			
See Instr		30(h) o	of the In	vestment	Compan	y Ac	t of 194	0				
1(b).												
(Print or Type	Responses)											
					e and Ticker or Trading 5. Relationship of Reporting Person(s) to							
Charlton Jeffrey Symbol				21				Issuer				
		I	Nielsen	Holdings	plc [NL	SN]		(Chec)	k all applicable)		
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction			(ence	a un applicable	,		
		((Month/D	ay/Year)				Director		Owner		
C/O NIELSEN HOLDINGS PLC, 85 10/27/2017					$17 \qquad \underline{X} \qquad 0$			XOfficer (give				
BROAD STREET								· · · · · · · · · · · · · · · · · · ·	orporate Contro	oller		
	(Street)	,	4 If Amo	ndmant Da	ta Origina	1			-			
	(Succe)			f Amendment, Date Original d(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
		1	r neu (mon									
NEW YOR	K, NY 10004							Form filed by M				
								Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction I	Date 2A. Deeme	ed	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye		Date, if	Transactio		-		Securities	Form: Direct			
(Instr. 3)		any (Month/Da	Code (Instr. 3, 4 and 5)				5)	Beneficially		Beneficial		
		(Monul/Da	ay/rear)	(Instr. 8)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
						(• • •		Reported	(()		
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	10/05/0015						\$	0.000.07	D			
Stock	10/27/2017			F	276	D	38.57	9,033.37	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)

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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	Secur	unt 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		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Charlton Jeffrey C/O NIELSEN HOLDINGS PLC 85 BROAD STREET NEW YORK, NY 10004			SVP & Corporate Controller					
Signatures								
/s/ Emily Epstein, Authorized Signatory		10/31/2017						
<u>**</u> 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).

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.