### Edgar Filing: Nielsen Holdings plc - Form 4

Nielsen Hold	lings plc											
Form 4												
February 17,												
FORM	14	UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL		
	UNITED	UNITED STATES SECURITIES AND EXCHANGE COMMISSIC Washington, D.C. 20549							OMB Number:	3235-0287		
Check thi		X										
if no long subject to		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O								Expires: 2005 Estimated average		
Section 1			SECURITIES					burden hou				
Form 4 or					a .		response 0.5					
Form 5 obligation	n a						-	e Act of 1934,				
may cont	inue.			vestment	•	· ·		1935 or Section	1			
See Instru 1(b).	iction	50(II)	or the m	vestment	Compan	ly 110	1 01 177	10				
-(-).												
(Print or Type R	Responses)											
1 Nama and A	ddress of Reporting	Dorson *	0 T					5 Deletionship of	Deporting Dars	on(s) to		
	Y ELIZABETH		2. Issuer Symbol	r Name <b>and</b>	Ticker or	Tradii	ng	5. Relationship of Reporting Person(s) to Issuer				
		Nielsen Holdings plc [NLSN]										
(Last)	(First) (I	Middle)	3. Date of Earliest Transaction					(Check all applicable)				
(Eust)	(1150) (1	induic)	(Month/Day/Year)					Director 10% Owner				
			02/12/2016					_X_ Officer (give title Other (specify below)				
STREET							Chief Human Resources Officer					
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
				Month/Day/Year)				Applicable Line)				
							Form filed by One Reporting Person Form filed by More than One Reporting					
NEW YORI	K, NY 10004							Person		porting		
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Date	e 2A. Deei	med	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Executio	n Date, if	Transaction(A) or Disposed of (D)			Securities	Form: Direct				
(Instr. 3)		any (Month/I	Day/Year)	Code (Instr. 8)	(Instr. 3,	4 and	5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(intolicity)	Suj, i cui)	(11511:0)				Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
						or	р.	(Instr. 3 and 4)				
Common					Amount	(D)	Price \$					
Stock	02/12/2016			F	534	D	ф 47.29	42,653.91	D			
										<b>D</b> <sub>M</sub>		
Common								500	Ι	By Children		
Stock								200		(1)		

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.

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 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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int 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						
1 8	Director	10% Owner	Officer	Other			
FINN MARY ELIZABETH C/O NIELSEN N.V. 85 BROAD STREET NEW YORK, NY 10004			Chief Human Resources Officer				
Signatures							
/s/Harris Black, Authorized Signatory		02/17/2016	5				

#### \*\*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) The Reporting Person disclaims beneficial ownership of the securities held by the children except to the extent of her pecuniary interest therein.

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.