Edgar Filing: Towers Watson & Co. - Form 4

Towers Watson	& Co.								
Form 4 October 19, 201	5								
								OMB A	PPROVAL
FORM 4	• UNITED	STATES					COMMISSIO		3235-0287
Check this be if no longer subject to Section 16. Form 4 or Form 5 obligations may continue <i>See</i> Instruction 1(b).	this box nger to a 16. or 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 20(b) of the Investment Company Act of 1940						Estimated burden hou response	urs per	
(Print or Type Resp	onses)								
1. Name and Addre Bodnar Anne D		Person [*]	Symbol	er Name an 8 Watson			5. Relationship o Issuer	of Reporting Per eck all applicabl	
(Last)	(First) (Middle)	3. Date of	of Earliest T	ransaction		(Chi	eck all applicabl	e)
		(Month/Day/Year) 10/15/2015			Director 10% Owner X_ Officer (give title Other (specify below) below) Chief Administrative Officer				
(Street) ARLINGTON, VA 22203			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
ARLINGTON,	VA 22203						Person		
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned
	ransaction Date onth/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	Code (Instr. 8)	4. Securiti nAcquired Disposed (Instr. 3, 4 Amount	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Reminder: Report of	on a separate line	e for each el	ass of sec	urities bene	ficially own	ned directly	or indirectly		
Kenninger, Kepolit (n a separate filk				Perso inform requir	ns who rest nation cont ed to resp ys a curre	spond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	01 (I (I	Acquired (r Dispose D) Instr. 3, 4 nd 5)	ed of				
				Code Y	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Unit	\$ 0	10/15/2015		A	0).7028 (1)		08/08/1988	08/08/1988	Class A Common Stock	0.7028
Restricted Stock Unit	\$ 0	10/15/2015		А	0).4685 (2)		08/08/1988	08/08/1988	Class A Common Stock	0.4685

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Bodnar Anne Donovan 901 N. GLEBE ROAD ARLINGTON, VA 22203			Chief Administrative Officer					

Signatures

Neil Falis, attorney-in-fact for Ms. Bodnar	10/19/2015		
** 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 dividends acquired pursuant to the participant's deferral election under the Towers Watson Non-Qualified Deferred Savings Plan for US Employees (the "Plan").
- (2) Represents dividends acquired pursuant to the Company's matching contribution on the participant's deferral election pursuant to the terms of the Plan and credited to the participant's account in the form of RSUs under the Plan.

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.