#### Edgar Filing: Towers Watson & Co. - Form 4

Towers Watson &	& Co.										
Form 4 November 05, 20	)15										
FORM 4										APPROV	AL
	UNITED	STATES		RITIES A shington				COMMISSIO	N OMB Number:	3235	-0287
Check this box if no longer subject to Section 16. Form 4 or Form 5	F CHANGES IN BENEFICIAL OWNERSHIP OI SECURITIES					Estimate burden h response	Expires:January 312005Estimated averageburden hours perresponse0.5				
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 Respo	onses)										
1. Name and Addres Bodnar Anne Do		Person <sup>*</sup>	Symbol	er Name <b>and</b> Watson o			-	5. Relationship Issuer			
(Last)	(First) (I	Middle)		of Earliest T			,	(Ch	eck all applica	ble)	
901 N. GLEBE ROAD			(Month/Day/Year) 11/04/2015			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)			<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting Person</li> </ul>					
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivat	ive Se	curities A	cquired, Disposed	of, or Benefic	iallv Owne	ed
	ansaction Date hth/Day/Year)	2A. Deemo Execution any (Month/Da	ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Secu nAcquin Dispos (Instr.	urities red (A) sed of 3, 4 ar (A or	) or (D) ad 5) .) r	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	7. Natur Indirect	e of al hip
Reminder: Report or	n a separate line	e for each cla	ass of sec	urities bene	ficially	owned	directly of	or indirectly.			
					Per info req dis	rsons ormat juired	who res ion cont to respo a curre	pond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not orm	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	Transacti	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)	Acquired (A) or Disposed (D) (Instr. 3, 4, and 5)				
				Code V	(A) (I	D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Unit	\$ 0	11/04/2015		А	9.6875 (1)	08/08/1988	08/08/1988	Class A Common Stock	9.6875
Restricted Stock Unit	\$ 0	11/04/2015		А	6.4584 (2)	08/08/1988	08/08/1988	Class A Common Stock	6.4584

## **Reporting Owners**

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

### Signatures

Neil Falis, attorney-in-fact for Ms. Bodnar	11/05/2015		
*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) Includes Restricted Stock Units ("RSUs") acquired pursuant to the participant's deferral election under the Towers Watson Non-Qualified Deferred Savings Plan for US Employees (the "Plan").
- (2) Includes Restricted Stock Units ("RSUs") 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.