

AON PLC Reported by LENG JAMES W

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 06/26/14 for the Period Ending 06/24/14

Telephone (44) 20 7623 5500

CIK 0000315293

Symbol AON

SIC Code 6411 - Insurance Agents, Brokers, and Service

Industry Insurance (Miscellaneous)

Sector Financial

Fiscal Year 12/31





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

ON OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2.	Issue	er Name	and T	icker	or	Γrad	ling S	ymb		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Leng James W	•			\mathbf{A}	on p	olc [AC	N]											
(Last) (First) (Middle)				3.	Date	of Earlie	est Tra	nsac	tion	(MN	I/DD/Y	YYY)	, –	X Director 10% Owner				
													Officer (gi	Officer (give title below) Other (specify below)				
8 DEVONSHIRE SQUARE							6/2	24/2	2014	1								
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)				
LONDON, X0 EC2M 4PL																		
(City) (State) (Zip)														X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	ole I - Noi	1-Deri	vativ	ve Securi	ties A	cqui	red,	Dis	pose	d of,	or Beneficially Ow	ned				
1				2. Trai Date	ns.	2A. Deemed Execution Date, if any	3. Trai Code (Instr.		Acc	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5				ount of Securities Beneficially Owned ing Reported Transaction(s) 3 and 4)			7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Cod	le V	/ Am	ount	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(IIISII. 4)	
Class A Ordinary Shares 6/				6/24/2	2014		A (1	1)	21:	56	A	(1)	215	2156				
נ	Гable II - 1	Derivati	ive Secur	ities B	enef	icially O	wned	(e.g.	, pı	ıts,	calls,	war	rants, options, con	vertible	securities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	Deemed	4. Trans. Code (Instr. 8)	D A D	Number of erivative Secquired (A) isposed of (Instr. 3, 4 and	curities or O)	and Expiration Date Securities Un			Secu: Deriv	tle and Amount of rities Underlying vative Security r. 3 and 4)	8. Price of Derivative Security (Instr. 5)	derivative Securities	Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	V	(A)	(D)	Date Exerc	isable	Exp Dat	oiration e	Title	Amount or Number of Shares		Reported Transaction (s) (Instr. 4)	(I) (Instr. 4)			

Explanation of Responses:

(1) Class A Ordinary Shares granted annually to each non-employee director of Aon plc. In accordance with U.K. law, the reporting person agreed to pay the issuer the nominal value of US\$0.01 per share issued to the reporting person.

Reporting Owners

Danastina Ossusas Nama / Addusas	Relationships							
Reporting Owner Name / Address	Director	10%	Owner	Officer	Other			
Leng James W								
8 DEVONSHIRE SQUARE	X							
LONDON, X0 EC2M 4PL								

Signatures

/s/ Matthew M. Rice -- by Matthew M. Rice pursuant to power of attorney from James W. Leng

6/26/2014

Date

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

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.