

AON PLC Reported by LEVIN MATTHEW

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 08/03/11 for the Period Ending 08/01/11

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

OMB APPROVAL OMB Number: 3235-0287 Expires: February 28, 2011 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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2.	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Levin Matthey	W			A	O	N COR	P [[AON]								
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							Director 10% Owner				
												X Officer (give title below) Other (specify				
AON CORPORATION -												below) EVP - Head of Global Strategy				
CORPORATI			200										01 01		-81	
EAST RANDO				H												
FLOOR			,													
(Street)												6. Individual or Joint/Group Filing (Check Applicable Line)				
CHICAGO, II	L 60601															
(City)	(State)	(Zip)								F			Reporting Per han One Repo		n
													,	•		
		Table	I - Non-	Deriv	ati	ve Securi	itie	s Acquire	ed, Dispo	sed of,	or Be	neficially	y Owned			
1.Title of Security (Instr. 3)				2. Tra	ans.	2A. Deemed			. Securities Acquired (A)		5. Amount of Securities Following Reported T		es Beneficially Owned		6. Ownership	7. Nature
(liisti. 3)			Date		Execution		nstr. 8)	Disposed of (D) (In	(Instr. 3 and 4)		ransaction(s)		Form: Be	Beneficial	
						Date, if any	-	(Instr. 3, 4 an (A)	d 5)					Direct (D) or Indirect	Ownership (Instr. 4)
									or						(I) (Instr. 4)	
								Code V A	Amount (D)	Price					(4)	
7F - 1.1	. II D	.• 4•	G4	D .	(* -! - II O		.1(41	1		4 •	4		•4•>	
						5. Number of							8. Price of	ible secur	1ties)	11. Nature
Security Conversion Oate Deemed (Instr. 3) Cerroise Execution		4. Trar Code		Derivative		6. Date Exe and Expirat		7. Title and An Securities Und				of		of Indirect		
			Execution Date, if	(Instr.		Securities Acquired (A) or		Derivative S						derivative	Form of Benefici Derivative Ownersh	Beneficial
	Derivative		any			Disposed of		(Instr. 3 and 4)			iiiu 4)		Beneficially			
	Security					(Instr. 3, 4 and 5)										
					H	,		_	<u> </u>		Amou	ınt or	1	Reported	(I) (Instr.	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Numb Share			Transaction (s) (Instr. 4)	4)	
Restricted Stock Units (Right to Receive)	(1)	8/1/2011		A		41797		(2)	(2)	Commor Stock	4	1797	\$0	41797	D	

Explanation of Responses:

- (1) The restricted stock units convert to shares of Aon common stock on a 1-for-1 basis.
- (2) The restricted stock units vest in accordance with the terms of the Aon Corporation 2011 Incentive Plan as follows: 20% of the award on each of the first through fifth anniversaries of the August 1, 2011 grant date.

Reporting Owners

Penerting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Levin Matthew AON CORPORATION - CORPORATE LAW DEPT								
200 EAST RANDOLPH STREET, 8TH FLOOR CHICAGO, IL 60601			EVP - Head of Global Strategy	,				

Signatures

/s/ Michele D. Welsh - by Michele D. Welsh pursuant to a power of attorney from Matthew Levin

8/3/2011

** Signature of Reporting Person

Date

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.