## Edgar Filing: Shook Ellyn - Form 4

Shook Ellyn

Shook Elly Form 4	n											
July 09, 20												
<b>FORM 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION										OMB APPROVAL		
UNITED STATES SECC				JRITIES AND EXCHANGE COMMISSION ashington, D.C. 20549				OMMISSION	OMB Number:	3235-0287		
Check if no lo	this box								Expires:	January 31, 2005		
subject		MENT O	F CHA	ANGES IN BENEFICIAL OWN				ERSHIP OF	Estimated average			
Section 16.				SECURITIES					burden hour response			
	Form 4 or Form 5 Eiled pursuant to Sec				tion 16(a) of the Securities Exchange Act of 1934,					0.5		
obligat	ions Section 17						•	1935 or Section	1			
may co <i>See</i> Ins	ntinue. truction	30(h)	) of the I	nvestmen	t Compa	ny A	Act of 1940	)				
1(b).												
(Print or Type	e Responses)											
1. Name and	Address of Reportin	g Person *	2 Icen	er Name on	d Ticker o	r Tra	ding	5. Relationship of 1	Reporting Pers	on(s) to		
Chools Ellere				2. Issuer Name <b>and</b> Ticker or Trading Symbol				Issuer				
			Accen	enture plc [ACN]				(Check all applicable)				
(Last)	(First)	(Middle)	3. Date	of Earliest 7	Fransactior	1		(Check	c all applicable	)		
[]				(Month/Day/Year)				Director 10% Owner				
161 N. CLARK STREET, C/O ACCENTURE			07/05/2018					XOfficer (give titleOther (specify below) below)				
ACCENT	UKE							Chief Leade	ership & HR O	fficer		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
			Filed(M	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
CHICAGO, IL 60601				-				Form filed by More than One Reporting				
								Person				
(City)	(State)	(Zip)	Tal	ble I - Non-	Derivativ	e Seci	urities Acqu	iired, Disposed of,	or Beneficiall	ly Owned		
1.Title of	2. Transaction Date			3. 4. Securities Acquired (A) Transaction Disposed of (D)					6.	7. Nature of		
Security (Instr. 3)	(Month/Day/Year)	Execution any	i Date, if	Code	(Instr. 3,			Securities Beneficially	Ownership Form: Direct	Indirect Beneficial		
(,			Month/Day/Year)		(Instr. 8)			Owned	(D) or	Ownership		
								Following Reported	Indirect (I) (Instr. 4)	(Instr. 4)		
						(A) or		Transaction(s)	(Instr. I)			
				Code V	Amount		Price	(Instr. 3 and 4)				
Class A							\$					
ordinary	07/05/2018			А	148 <u>(1)</u>	А	ф 164.005	36,082	D			
shares												

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

## Edgar Filing: Shook Ellyn - Form 4

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. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	Director 10% Owner Officer		Other				
Shook Ellyn 161 N. CLARK STREET C/O ACCENTURE CHICAGO, IL 60601			Chief Leadership & HR Officer					
Signatures								
/s/ Danika Haueisen, Attorney-in-Fact for Ellyn Shook			07/09/2018					
<u>**</u> Signature of Reporting	Person		Date					
<b>Explanation of Re</b>	spon	ses:						

\* 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) Purchase of Accenture plc Class A ordinary shares from Accenture pursuant to the Voluntary Equity Investment Program.

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.