Edgar Filing: JAZZ PHARMACEUTICALS INC - Form 4

JAZZ PHARM Form 4 June 02, 2008	IACEUTICALS	INC										
FORM Check this b if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruct 1(b).	Filed pursu section 17(a)	ENT OF uant to S) of the I	Was	hingto GES II SECU 5(a) of ility He	on, I N B JRI the oldi	D.C. 205 EENEFI TIES Securitiong Com	5 49 C IAI es Ex pany	L OW tchang Act o	COMMISSION NERSHIP OF ge Act of 1934, f 1935 or Sectio 40	OMB Number: Expires: Estimated a burden hou response	irs per	
(Print or Type Res	sponses)											
Fust Matthew K Sys						Ticker or T			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	(First) (Mi ARMACEUTIC DRTER DRIVE	iddle) CALS,	3. Date of (Month/Da 05/30/20	ay/Year)		nsaction			Director X Officer (give below) E		owner er (specify	
(Street) 4. If Amer Filed(Mont PALO ALTO, CA 94304						e Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State) (Z	Zip)	Table	e I - Nor	1-De	rivative S	ecurit	ties Aco	quired, Disposed of	f, or Beneficial	lly Owned	
	2. Transaction Date (Month/Day/Year)	Executio any		Code (Instr.	8)	4. Securit nAcquired Disposed (Instr. 3, Amount	(A) o 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)		
Common Stock	05/30/2008			J <u>(1)</u>		1,203	A	\$ 6.5	58,569	D		

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)

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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Edgar Filing: JAZZ PHARMACEUTICALS INC - Form 4

Reporting Owners

Reporting Owner Name / Address		Relationships							
	Director	10% Owner	Officer	Other					
Fust Matthew K C/O JAZZ PHARMACEUT 3180 PORTER DRIVE PALO ALTO, CA 94304			EVP and CFO						
Signatures									
Matthew K. Fust	06/02/2008								
<u>**</u> 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) Shares acquired through a qualified Section 423 Employee Stock Purchase 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.