Jazz Pharmaceuticals plc Form 4 March 02, 2016

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

3235-0287 Number: January 31, Expires:

2005 Estimated average burden hours per

response... 0.5

if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

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

1(b).

Ordinary

Shares

02/29/2016

(Print or Type Responses)

1. Name and Address of Reporting Person ** WILSON KAREN J			Symbol		d Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer					
			Jazz Ph	armaceut	icals plc [JAZZ]	(Check all applicable)					
(Last)	(First)	(Middle)	3. Date of	f Earliest T	ransaction			••			
			(Month/D	Day/Year)			Director		Owner		
CONNAUGHT HOUSE, 1			02/29/2016				X Officer (give title Other (specify below)				
BURLINGTON RD, FL. 4						SVP, Finance & PAO					
		4. If Ame	endment, D	ate Original	6. Individual or Joint/Group Filing(Check						
DUBLIN 4		Filed(Mon	nth/Day/Yea	r)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Tabl	le I - Non-l	Derivative Securities Acc	quired, I	Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Da	ite 2A. Deer	ned	3.	4. Securities Acquired	5. Ar	nount of	6.	7. Nature of		
Security	(Month/Day/Year	e) Execution	n Date, if		on(A) or Disposed of (D)	Secu		Ownership	Indirect		
(Instr. 3)		any		Code	(Instr. 3, 4 and 5)		ficially	Form: Direct			
		(Month/I	Day/Year)	(Instr. 8)		Own		(D) or	Ownership		
						Follo	wing	Indirect (I)	(Instr. 4)		

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

 $F_{-}^{(1)}$

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Reported

26,394

Transaction(s) (Instr. 3 and 4) (Instr. 4)

D

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(A)

(D)

D

Price

121.58

Amount

348

Edgar Filing: Jazz Pharmaceuticals plc - Form 4

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	· · · · · · · · · · · · · · · · · · ·	Transactio		Expiration D		Amou		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	rear)	Under	, ,	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(IIISti
					4, and 5)						
									Amount		
						Data	Evniration		or		
						Date Expiration Exercisable Date	Title	Title Number			
							Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

WILSON KAREN J CONNAUGHT HOUSE, 1 BURLINGTON RD, FL. 4 DUBLIN 4, L2

SVP, Finance & PAO

Signatures

By: /s/ Karen Eberle as attoney in fact For: Karen J. 03/01/2016 Wilson

**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 withheld to satisfy tax obligations arising out of vesting of a portion of previously granted restricted stock units.

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.

Reporting Owners 2