| SEC Form 4 | |
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FORM 4

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

| | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPROVAL | | | | | | | | |
|----------------------|------|--|--|--|--|--|--|--|
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| hours por response: | 0.5 | | | | | | | |

| hours per response: | 0.5 |
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| Estimated average st | |

| 1. Name and Addres <u>Tobias Jeffrey</u> | ss of Reporting Perso 7 <u>K</u> | n* | 2. Issuer Name and Ticker or Trading Symbol Jazz Pharmaceuticals plc [JAZZ] | | tionship of Reporting Perso all applicable) Director Officer (give title | on(s) to Issuer 10% Owner Other (specify |
|--|-------------------------------------|-------|---|------------------------|---|--|
| (Last)(First)(Middle)C/O JAZZ PHARMACEUTICALS PLCCONNAUGHT HOUSE, 1 BURLINGTON RD, FL. | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/05/2014 | | below) EVP, Research & Dev | below) 7 and CMO |
| 4 (Street) DUBLIN 4 (City) | L2 (State) | (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | idual or Joint/Group Filing Form filed by One Repor Form filed by More than Person | rting Person |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | Disposed Of | | | Securities Beneficially | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|------------------------------|---|-------------|---------------|---------|------------------------------------|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) |
| Ordinary Shares | 03/05/2014 | | F ⁽¹⁾ | | 1,174 | D | \$157.6 | 48,103 | D | |

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

| | | | (0.9.) P | , . | ·•••••, | | , | ••••••• | | | ,, | | | | |
|---|---|--|---|------------------------------|---------|--|---|---------------------|--------------------|--|---|---|--|--|--|
| 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. Transa Code (8) | | of Deriv Secu Acqu (A) of Dispo of (D) (Instr | 5. Number of Expiration Date (Month/Day/Yes Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ate | 7. Title Amoun Securi Under Deriva Securi and 4) | nt of ties ying tive ty (Instr. 3 | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

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

Remarks:

/s/ Larissa Schwartz as attorney 03/06/2014

in fact for Jeffrey Tobias

** 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 Number.