FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
	OMB Number:	3235-0287				
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

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

1. Name and Address of Reporting Person* BERNS PAUL L						2. Issuer Name and Ticker or Trading Symbol Jazz Pharmaceuticals plc [JAZZ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
DEKIN										X	Directo	virector		10% Ow	/ner				
(Last) (First) (Middle) 5TH FL, WATERLOO EXCHANGE WATERLOO RD						3. Date of Earliest Transaction (Month/Day/Year) 08/10/2017									Officer below)	(give title		Other (s below)	pecify
WAIERI	LOO RD	4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable							
(Street)														X Form filed by One Reporting Person					
DUBLIN 4 L2														Form filed by More than One Reporting Person					
(City) (State) (Zip)																			
		Tab	le I - N	lon-Deri	vative	Sec	uritie	s Ad	cquire	ed, D	isposed c	of, or B	eneficia	ılly (Owned	t			
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/						Exect if any	eemed ution Date, :h/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,			and 5) Se Be Ov		5. Amount of Securities Beneficially Owned Following		n: Direct r Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price			ed ction(s) 3 and 4)			Instr. 4)
Ordinary	Shares	2017	17			A ⁽¹⁾		1,365(1)	A	\$0.0	0 6		,599		D				
Ordinary	2017	17			S ⁽²⁾		659	D	\$142.3	12.36 5		,940		D					
Ordinary	2017	17					3	D	\$144.13	307 5,		,937		D					
		Т	able I								posed of, , converti				wned	,		•	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any		4. Transa Code (8)	ction	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y		cisable and	7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. I De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	O Felly D O()	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						
Non- Qualified Stock Option (right to	\$143.66	08/10/2017			A ⁽³⁾		3,415		(3	3)	08/09/2027	Ordinary Shares	3,415		\$0.0	3,415		D	

Explanation of Responses:

- 1. These restricted stock units are granted pursuant to the Issuer's 2007 Non-Employee Directors Stock Award Plan. Each restricted stock unit represents a contingent right to receive one ordinary share upon the vesting of the unit. Subject to the Reporting Person's continuous service and certain additional conditions, these units will vest in full on August 3, 2018.
- 2. Shares sold to satisfy tax obligations arising out of the vesting of previously granted restricted stock units.
- 3. These options are granted pursuant to the Issuer's 2007 Non-Employee Directors Stock Award Plan. Subject to the Reporting Person's continuous service and certain additional conditions, these options will vest in 12 equal monthly installments beginning on September 1, 2017.

By: /s/Peter A Christou, as attorney in fact For: Paul A

08/14/2017

Berns

** 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.