Instruction 1(b).

## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burde	en								
hours per response:	0.5								

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 RIEDEL	Jazz Pharmaceuticals plc [ JAZZ ]								(Ch	eck all applic	r 10%		10% Ov	ner					
(Last) (First) (Middle) C/O JAZZ PHARMACEUTICALS PLC CONNAUGHT HOUSE, 1 BURLINGTON RD., FL.						3. Date of Earliest Transaction (Month/Day/Year) 08/07/2015									(give title		Other (s below)	pecify	
4	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)									
(Street) DUBLIN L2 4						1									X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	(Sta	te) (Z	ip)																
		Table	e I - N	on-Deriv	ative	Secu	ırities	Ac	quire	d, Di	isposed of	f, or Be	eneficial	ly Owned	l				
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		.	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an				es ially Following	6. Owne Form: D (D) or In (I) (Instr.	irect I direct I 4) (	7. Nature of ndirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)		(	Instr. 4)	
Ordinary Shares 08/07/20						)15			A <sup>(1)</sup>		1,310(1)	A	\$0.00	5,	,666	D			
Ordinary Shares 08/10/20						)15			<b>S</b> <sup>(2)</sup>		797	D	\$179.9	8 4,	,869	D			
Ordinary Shares 08/10/20					)15			S <sup>(2)</sup>		4	D	\$183.36	01 4,	4,865					
		Та	able II								posed of, convertib			Owned					
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. Transaction Code (Instr. 8)				Expiration D		ate	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	Own Forn Director In (I) (Ir	vnership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares						
Nonstatutory Stock Option (right	\$181.79	08/07/2015			A		3,415		(:	3)	08/06/2025	Ordinary Shares	3,415	\$0.00	3,415	5	D		

## **Explanation of Responses:**

- 1. These restricted stock units are granted pursuant to the Issuer's 2007 Equity Incentive 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 July 30, 2016.
- 2. Shares sold to satisfy tax obligations arising out of the vesting of previously granted restricted stock units.
- 3. This option is granted pursuant to the Issuer's 2007 Non-Employee Directors Stock Option Plan. Subject to the Reporting Person's continuous service and certain additional conditions, this option vests in 12 equal monthly installments beginning on August 1, 2015.

## Remarks:

/s/ Larissa Schwartz as attorney 08/11/2015 in fact for Norbert Riedel

\*\* 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.