FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.O. Loc

l	OMB APPRO	OVAL					
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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* Gamble Carol A (Last) (First) (Middle) C/O JAZZ PHARMACEUTICALS, INC. 3180 PORTER DRIVE						Issuer Name and Ticker or Trading Symbol JAZZ PHARMACEUTICALS INC [JAZZ] Date of Earliest Transaction (Month/Day/Year) 12/03/2010 4. If Amendment, Date of Original Filed (Month/Day/Year)									all applic Director Officer below)	r (give title	nd Se	10% Ow Other (s below) Cretary	ner pecify
(Street) PALO A (City)	•														X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day)				ction	on 2A. Deemed Execution Date,			3. Transac	ction	4. Securities Disposed Of	(A) or	5. Amou		int of	Form	orm: Direct	7. Nature of Indirect Beneficial		
				(монилоау/теа		ar) if any (Month/Day/Year)		Code (Instr. 8)		Amount	(A) or (D)	Price		Owned Following Reported Transaction(s) (Instr. 3 and 4)		(I) (Instr. 4)		Ownership (Instr. 4)	
Common Stock				12/03/	2010	010					8,885	Α	\$1.	\$1.25		5,089		D	
Common	ommon Stock 12/03/2					10		М		16,115	A	\$7.	\$7.96		32,204		D		
Common Stock 12/03/2				2010)10		S		25,000	D	\$17.7	\$17.77(1)(2)		7,204		D			
		-	Table II								posed of, convertil				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Execution if any (Month/I		4. Transa Code (8)				6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		Do	Price of erivative ecurity 1str. 5)	9. Number o derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	oer					
Option (right to buy)	\$1.25	12/03/2010			M			8,885	(3)		01/20/2019	Common Stock	8,88	35	\$0	31,115		D	
Option (right to	\$7.96	12/03/2010			M			16,115	(4)		05/15/2018	Common	16,1	15	\$0	28,885		D	

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$17.70 to \$17.90, inclusive.
- 2. The reporting person undertakes to provide to Jazz Pharmaceuticals, Inc., any security holder of Jazz Pharmaceuticals, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares acquired at each separate price within the range set forth in footnote (1) to this Form 4.
- 3. The options vest over three years measured from the vesting commencement date, January 21, 2009, with 1/3rd vesting on the first anniversary of the vesting commencement date and the remainder vesting in 24 equal monthly installments thereafter.
- 4. The options vest over four years measured from the vesting commencement date, May 16, 2008, with 1/4th vesting on the first anniversary of the vesting commencement date and the remainder vesting in 36 equal monthly installments thereafter.

Remarks:

/s/ Carol A. Gamble

12/03/2010

** 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.