FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TATEMENT	OF CHANGE	S IN RENEEICIAI	

l	OMB APPRO	OVAL
	OMB Number:	3235-0287
l	Estimated average burd	en
l	hours per response:	0.5

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* <u>Hooper Suzanne Sawochka</u>						2. Issuer Name and Ticker or Trading Symbol Jazz Pharmaceuticals plc [JAZZ] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Total Officer (give title Other (specify														
(Last) (First) (Middle) 5TH FL, WATERLOO EXCHANGE WATERLOO RD					3. Date of Earliest Transaction (Month/Day/Year) 12/14/2018 Level 4. Delow) below) below) EVP & General Counsel															
(Street) DUBLIN 4 L2					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										Form filed by More than One Reporting Person Form filed by More than One Reporting Person				
(City)	(51		(Zip) 	n-Deriv	ative	Sec	urit	ies Ar	nuired	Die	snosed o	of or Re	nefic	ially	Owner	1				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			ection	ction 2A Exap/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4		or 5. Amor and 5) Securiti Benefic Owned		int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct r Indirect I istr. 4) (7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price)	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Ordinary Shares 12/14/				/2018	2018					3,295	A	\$46	5.83	44,	518 ⁽¹⁾		D			
Ordinary Shares 12/14/				/2018	2018					3,295	D	\$14	0.21	1 41,223			D			
Ordinary Shares 12/14/2				/2018	2018		S ⁽²⁾		39	D	\$14	0.21	41	,184		D				
		Т	able II -								osed of converti				wned			,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transaction Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Year		е	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amour or Number of Shares	er						
Non- Qualified Stock Option (right to	\$46.83	12/14/2018			M ⁽²⁾			3,295	(3)		08/08/2022	Ordinary Shares	3,29	5	\$0.0	35,337	,	D		

Explanation of Responses:

- 1. Includes 173 ordinary shares acquired on May 31, 2018 and 72 shares acquired on November 30, 2018 under a Section 423 Employee Stock Purchase Plan.
- 2. This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person.
- 3. This non-qualified stock option is part of an option award granted on August 9, 2012. The ordinary shares subject to the option award vested over 4 years from the vesting commencement date of August 9, 2012, with 1/4th vesting on the first anniversary of the vesting commencement date and the remainder vesting in 36 equal monthly installments thereafter and were fully vested as of August 9, 2016.

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

12/14/2018

Sawochka Hooper

** 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.