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	STATEMENT OF CHA
Instruction 1(b).	Filed pursuant to Section 20/6

NGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden 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 Address of Reporting Person* <u>WILSON KAREN J</u>						2. Issuer Name and Ticker or Trading Symbol JAZZ PHARMACEUTICALS INC [JAZZ]							Check all a Di	ationship of Reportir all applicable) Director Officer (give title		erson(s) to Iss 10% O Other (vner
(Last) (First) (Middle) C/O JAZZ PHARMACEUTICALS, INC. 3180 PORTER DRIVE				03/	3. Date of Earliest Transaction (Month/Day/Year) 03/10/2011								low) "	of Financ	below) e & PAO		
(Street) PALO ALTO CA 94304				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							ine) X Fo	·				
(City)	(S		(Zip)														
			le I - Non			_			quired, Di	_	-		-				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Day/Year)		2A. Deemed Execution Date if any (Month/Day/Yea		Code (Ins	on Dispos			nd Sec Ben Owr	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	Amoun			Trar					
		-							uired, Dis , options,					ed	,		
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	Date, T	4. Transaction Code (Instr 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		of Securi Underlyir Derivativ	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		cive c cy 5) E F F	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Expiratior Date	Title	Amour or Number of Shares	er				
Option (right to	\$27.46	03/10/2011			A		50,000		(1)	03/09/202	Common Stock	50,00	00 \$0		50,000	D	

Explanation of Responses:

Remarks:

/s/ Karen J. Wilson

03/10/2011

** 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.

^{1.} The options vest over four years measured from the vesting commencement date, February 7, 2011, with 1/4th vesting on the first anniversary of the vesting commencement date and the remainder vesting in 36 equal monthly installments thereafter.