Instruction 1(b)

### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

## CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 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*  McSharry Heather Ann						2. Issuer Name <b>and</b> Ticker or Trading Symbol Jazz Pharmaceuticals plc [ JAZZ ]								eck all applic  X Directo	tionship of Reportinç all applicable) Director Officer (give title		Person(s) to Issuer  10% Owner  Other (cpetit	
(Last) (First) (Middle) C/O JAZZ PHARMACEUTICALS PLC CONNAUGHT HOUSE, 1 BURLINGTON RD., FL.					08/0	3. Date of Earliest Transaction (Month/Day/Year) 08/07/2015  4. If Amendment, Date of Original Filed (Month/Day/Year)								below)		Other (specibelow)  Filing (Check Applicate		
(Street) DUBLIN L2 4													Y Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta		ip)									-						
1. Title of Security (Instr. 3)		2. Transacti Date	Transaction		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			5. Amou Securiti Benefic	int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)			Instr. 4)
Ordinary Shares 08/07/2			08/07/20	015	15			A <sup>(1)</sup>		1,310 <sup>(1)</sup>	A	\$0.00	6,	6,960		D		
Ordinary Shares 08/10			08/10/20	)15			<b>S</b> <sup>(2)</sup>		863	D	\$179.9	6,	6,097		D			
Ordinary Shares 08/			08/10/20	)15			<b>S</b> <sup>(2)</sup>		4	D	\$182.31	01 6,	6,093		D			
		Та	ıble 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)	Execu if any	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exerc ation D :h/Day/		7. Title a Amount Securitie Underlyi Derivativ (Instr. 3	of es ng re Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	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	3)	08/06/2025	Ordinary Shares	3,415	\$0.00	3,415		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 Heather Ann **McSharry** 

\*\* 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.