Edgar Filing: Jazz Pharmaceuticals plc - Form 4

Jazz Pharmac Form 4	•										
April 21, 201									OMB AI	PPROVAL	
FORM	UNITED	STATES		ATTIES A			IGE (COMMISSION		3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 chligations				GES IN BENEFICIAL OWNERSHIP SECURITIES 5(a) of the Securities Exchange Act of 19 ility Holding Company Act of 1935 or S					January 31 Expires: 200 Estimated average burden hours per response 0.3		
See Instru 1(b).		30(h)	of the In	vestment	Compan	y Act	of 194	40			
(Print or Type R	Responses)										
Winningham Rick E Symbol				uer Name and Ticker or Trading l Pharmaceuticals plc [JAZZ]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O THERA GATEWAY	VANCE, INC.	(Middle) , 901	3. Date of (Month/D 04/17/20	-	ansaction			X Director Officer (give below)	10%	o Owner er (specify	
				ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
SOUTH SA FRANCISC	N O, CA 94080							Form filed by N Form filed by N Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year) Executio any	ned n Date, if Day/Year)	Code (Instr. 8)	on(A) or Di (Instr. 3, 4	sposed 4 and 5 (A) or	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Ordinary Shares	04/17/2014			Code V S(1)	Amount 27,500	(D) D	Price \$ 140	13,587	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

	Code	of Derivative Securities Acquired			7. Title and Amount of Underlying Securities (Instr. 3 and 4	8. Price of Derivative Security (Instr. 5) 4)	9. Nu Deriv Secu Bene Owne Follo
		(A) or Disposed of (D)					Repo Trans (Instr
		(Instr. 3, 4, and 5)					(insu
	Code V	(A) (D)	Date Exercisable	Expiration Date	or Title Numb of	er	
	•	(Month/Day/Year) Execution Date, if Transaction any Code (Month/Day/Year) (Instr. 8)	(Month/Day/Year) Execution Date, if any Code of (Month/Day/Year) (Instr. 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year) Execution Date, if any (Month/Day/Year) TransactionNumber Expiration D Code of (Month/Day/ (Month/Day/Year) (Instr. 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) Date Exercisable	<pre>(Month/Day/Year) Execution Date, if any Code of (Month/Day/Year) (Month/Day/Year) (Instr. 8) Derivative Securities</pre>	(Month/Day/Year)Execution Date, if any (Month/Day/Year)Transaction Number CodeExpiration Date (Month/Day/Year)Amount of Underlying Securities (Instr. 8)(Month/Day/Year)(Instr. 8)Derivative Securities (A) or Disposed of (D) (Instr. 3, 4, and 5)Securities Securities (Instr. 3)Instr. 90DateExpiration DateExpiration DateTitleAmount of Underlying Securities (Instr. 3)	(Month/Day/Year)Execution Date, if any (Month/Day/Year)Transacti>Iumber Code ofExpiration Date, ofAmount of Undrug Securities (Month/Day/Year)Derivative Securities (Month/Day/Year)Derivative Securities (Month/Day/Year)Amount of Undrug Securities (Instr. 5)Derivative Securities (Instr. 3) Acquired of (D) (Instr. 3, 4, and 5)Expiration Date, (Month/Day/Year)Amount of Undrug Securities (Instr. 5)Derivative Securities (Instr. 5)Derivative Securities

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Winningham Rick E C/O THERAVANCE, INC. 901 GATEWAY BLVD SOUTH SAN FRANCISCO, CA 94080	Х						
Signatures							
/s/ Larissa Schwartz as attorney in fact fo Winningham	or Rick		04/2	21/2014			
**Signature of Reporting Person			1	Date			

Explanation of Responses:

* 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).

(1) The transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.