Hooper Suzanne Sawochka

Form 3

FORM	TINT	TED STA	ED STATES SECURITIES AND EXCHANGE COMMISSION					OMB APPROVAL			
			Washington, D.C. 20549				OMB Number:	3235-	0104		
	Ι	NITIAL S		T OF BENEFICIAL OWNERS			HIP O	F	Expires:	Januar	y 31, 2005
		on 17(a) of	to Section 16(a) of the Public Utility 0(h) of the Investn	Holding Com	pany A	Act of 193			Estimated a burden hou response	average	0.5
(Print or Type Re	esponses)										
Person * Statement Hooper Suzanne Sawochka (Month/D			2. Date of Event Red Statement (Month/Day/Year)		<ul><li><sup>g</sup> 3. Issuer Name and Ticker or Trading Symbol</li><li>Jazz Pharmaceuticals plc [JAZZ]</li></ul>						
(Last)	(First)	(Middle)	03/12/2012						5. If Amendment, Date Original Filed(Month/Day/Year)		
C/O JAZZ PHARMACEUTICALS PLC, 45 FITZWILLIAM SQUARE (Street) DUBLIN 2, L2Â			(Check all applicable) Director 10% Owner X Officer Other (give title below) (specify below) EVP and General Counsel			Filing _X_ Fo Person Fo	Individual or Joint/Group iling(Check Applicable Line) K_ Form filed by One Reporting erson _ Form filed by More than One eporting Person				
(City)	(State)	(Zip)	Tabl	e I - Non-Dei	rivativ	e Securit	ies Be	nefici	ally Owned	l	
1.Title of Securi (Instr. 4)	ty			nount of Securitie ficially Owned . 4)	(       	8. Dwnership Form: Direct (D) or Indirect I) Instr. 5)	4. Nat Owne (Instr.	rship	Indirect Benef	icial	
Reminder: Report owned directly o	or indirectly. Perso inform requir	ns who resp nation conta ed to respo	ich class of securities l pond to the collect ained in this form a and unless the form MB control number	ion of ire not n displays a	SEC	C 1473 (7-02	2)				

## Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

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Date Exercisable	Expiration Date	Title	Amount or Number of	Security	Direct (D) or Indirect
			Shares		(I) (Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address		Relationships						
		Director	10% Owner	Officer	Other			
Hooper Suzanne Sawochka C/O JAZZ PHARMACEUTICALS PLC 45 FITZWILLIAM SQUARE DUBLIN 2, L2Â		Â	Â	EVP and General Counsel	Â			
Signatures								
/s/ Suzanne S. Hooper	03/13/2012							
<b>**</b> Signature of Reporting Person	Date							
Evalenction of	Deenen							

## **Explanation of Responses:**

No securities are beneficially owned

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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. 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.