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SEBULSKY A	LAN									
Form 4										
November 08, 2	2011									
FORM 4	4		CECU	DIFIEG					PPROVAL	
Washington, D.C. 20549								N OMB Number:	3235-0287	
Check this box if no longer CTATED (ENTER OF CHANGES IN DEDUCTATE ON DEDUCTOR							Expires:	January 31, 2005		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. Form 4 or							Estimated burden hou	Estimated average burden hours per response 0.5		
Form 5 obligations may continue <i>See</i> Instruction 1(b).	e. Section 17(a) of the l	Public U	Jtility Ho	lding Cor		nge Act of 1934, a of 1935 or Secti 1940			
(Print or Type Resp	ponses)									
1. Name and Addr SEBULSKY A	Person [*]	2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer					
	JAZZ PHARMACEUTICALS INC [JAZZ]				C (Check all applicable)					
(Last)	(First) (Middle)	3. Date of Earliest Transaction			X_ Director 10% Owner Officer (give title Other (specify				
(Month/Day/Year) (Month/Day/Year) Offic below) C/O JAZZ PHARMACEUTICALS, 11/04/2011 INC., 3180 PORTER DRIVE						below)	iei (specify			
(Street) 4. If Amendment, Date Origin Filed(Month/Day/Year)					nal 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
PALO ALTO,	CA 94304						Person	whole than one R	cporting	
(City)	(State)	(Zip)	Tał	ole I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	ally Owned	
	Fransaction Date onth/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	Code	4. Securit onAcquired Disposed (Instr. 3, 4	(A) or of (D)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership	
		(11011112)	, ,	(11001-0)	(11547-0)	(A)	Following Reported Transaction(s)	(Instr. 4)	(Instr. 4)	
Code					Amount	or (D) Price	(Instr. 3 and 4)			
Reminder: Report	on a separate line	e for each cl	ass of sec	urities bene	eficially ow	ned directly	or indirectly.			
·	·				Perso inform requir	ns who res nation con red to resp nys a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tab					posed of, or convertible	Beneficially Owners	d		

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	1
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	ļ

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	` ·	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A) (E) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option (right to buy)	\$ 34.99	11/04/2011		А	12,500	(1)	11/04/2021	Common Stock	12,500	
Phantom Stock	<u>(2)</u>	11/04/2011		А	715	(2)	(2)	Common Stock	715	

Reporting Owners

Reporting Owner Name / Address		Relationsh		
	Director	10% Owner	Officer	Other
SEBULSKY ALAN C/O JAZZ PHARMACEUTICALS, INC. 3180 PORTER DRIVE PALO ALTO, CA 94304	Х			
Signatures				
/s/ Carol A. Gamble as attorney-in-fact for Sebulsky	Alan	1	1/08/20	11
**Signature of Reporting Person			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).

The option shares shall vest in a series of twelve (12) successive equal installments upon completion of each month of Continuous
(1) Service (as defined under the Issuer's Amended and Restated 2007 Non-Employee Directors Stock Option Plan) over the one (1)-year period measured from August 15, 2011.

Each share of phantom stock is the economic equivalent of one share of the Issuer's common stock. The shares of phantom stock become payable in common stock upon the earlier to occur of the tenth (10th) business day following (i) the Reporting Person's separation from explore a director of the tenth (2) of the tenth (10th) business day following (i) the Reporting Person's separation from the tenth (10th) business day following (i) the Reporting Person's separation from the tenth (10th) business day following (i) the Reporting Person's separation from the tenth (10th) business day following (i) the Reporting Person's separation from the tenth (10th) business day following (i) the Reporting Person's separation from the tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting Person's separation from tenth (10th) business day following (i) the Reporting P

service as a director or (ii) a Change of Control (as defined under the Issuer's Amended and Restated Directors Deferred Compensation Plan).

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.