Horizon Pharma plc Form 3 March 02, 2016 **FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION** Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104 January 31,

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Expires:

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> CURTIS GEOFFREY M.			2. Date of Event Requiring Statement (Month/Day/Year)	^g 3. Issuer Name and Ticker or Trading Symbol Horizon Pharma plc [HZNP]						
(Last) C/O HORIZO PLC, CONN 1ST FL, 1 BU	JAUGHT	HOUSE,	02/26/2016		4. Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date Original Filed(Month/Day/Year)		
	(Street)				.e			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
DUBLIN, L2 4							Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	ŗ	Table I - N	lon-Derivat	tive Securiti	ies Be	neficially Owned		
1.Title of Securit (Instr. 4)	у			2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr	*		
Ordinary Shar	es			258		D	Â			
Ordinary Shar	es			420		Ι	By s	pouse		

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

SEC 1473 (7-02)

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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
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	Ownership

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	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	(Instr. 5)
Stock Option (Right to Buy)	(1)	04/07/2025	Ordinary Shares	17,000	\$ 27.43	D	Â
Stock Option (Right to Buy)	(1)	04/30/2025	Ordinary Shares	20,000	\$ 29.22	D	Â
Restricted Stock Units	(2)	(2)	Ordinary Shares	28,000	\$ <u>(2)</u>	D	Â
Performance Share Units (PSU)	(<u>3)</u>	(3)	Ordinary Shares	160,000	\$ <u>(3)</u>	D	Â

Reporting Owners

Reporting Owner Name / Address		Relationships				
reporting o whet Funite / Futuress	Director	10% Owner	Officer	Other		
CURTIS GEOFFREY M. C/O HORIZON PHARMA PLC CONNAUGHT HOUSE, 1ST FL, 1 BURLINGTON RD DUBLIN. L2 4	Â	Â	SVP, Corporate Communications	Â		

Signatures

/s/ Miles W. McHugh, Attorney-in-Fact 03/02/2016

**Signature of Reporting Person

Explanation of Responses:

- * 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).

Date

- (1) $\frac{25\%}{2015}$ of the shares subject to the option vest and become exercisable on the first anniversary of the vesting commencement date (April 8, 2015), and the remaining shares vest in 36 equal monthly installments thereafter.
- (2) Each restricted stock unit represents a contingent right to receive one ordinary share of the Issuer. The restricted stock units vest 25% annually on each anniversary of the vesting commencement date (April 8, 2015).

Each PSU represents a contingent right to receive ordinary shares of the Issuer, based on the Issuer's level of total shareholder return, as measured from March 23, 2015 through December 22, 2017, March 22, 2018 and June 22, 2018 or based on the level of total shareholder

(3) return through any earlier change in control. For such purposes, total shareholder return means the percentage change in the price of the Issuer's ordinary shares on a compounded annual basis, plus the value of reinvested dividends. The number of shares issued may range from zero (0) shares to the maximum number of shares reported in column 3 of this report.

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.