### Edgar Filing: PERRIGO Co plc - Form 4

PERRIGO C	Co plc										
Form 4											
November 1	7, 2015										
FORM	14 UNITED	STATE	SECU	)ITIES A	ND EV	CUA	NCEO	OMMISSION		PROVAL	
<b>CURIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check this box							January 31,				
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF						NERSHIP OF	Expires: 2005				
subject to STATE WERT OF CHARGES IN DEPTETAL OF Section 16. SECURITIES							Estimated average burden hours per response 0.5				
	Form 4 or										
Form 5 obligatio	<b>n</b> o <b>*</b>						•	e Act of 1934,			
may cont				•	•	-	•	1935 or Section	n		
See Instr	uction	30(h)	) of the In	vestment	Compan	iy Ac	t of 194	10			
1(b).											
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> FOUSE JACQUALYN A			2. Issue	2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
			2								
		PERRIGO Co plc [PRGO]					(Check all applicable)				
(Last)				e of Earliest Transaction							
C/O PERRIGO COMPANY, 515			(Month/Day/Year) 11/13/2015					X_ Director 10% Owner Officer (give title Other (specify			
EASTERN AVENUE			11/13/2013					below) below)			
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
				Filed(Month/Day/Year)				Applicable Line)			
_X_ Fo					_X_ Form filed by C	rm filed by One Reporting Person m filed by More than One Reporting					
ALLEGAN	, MI 49010							Person	fore than One Re	porung	
(City)	(State)	(Zip)	Tabl	le I - Non-D	)erivative	Secur	ities Aca	uired, Disposed of	or Beneficial	lv Owned	
1.Title of	2 Transaction Dat	e 24 Dee		3.			-	5. Amount of	6. Ownership	•	
Security (Month/Day/Year) Executio (Instr. 3) any			· · · · · · · · · · · · · · · · · · ·					Securities	Form: Direct		
				Code (Instr. 3, 4 and 5)				Beneficially		Beneficial	
(Month/Day/				ay/Year) (Instr. 8)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
						(A)		Reported	(	(	
						or		Transaction(s) (Instr. 3 and 4)			
o !!				Code V	Amount	(D)	Price	(Insu: 5 and 4)			
Ordinary	11/13/2015			<b>M</b> (1)	1,929	А	\$ 146.9	4,362	D		
Shares											
Ordinary	11/13/2015			F	926	D	\$	3,436	D		
Shares							146.9				

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.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	omf Do Secu Acqu (A) o Disp (D)	rities uired or osed of r. 3, 4,	6. Date Exerci Expiration Dat (Month/Day/Y	e	7. Title and of Underlyin Securities (Instr. 3 and	ng
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units	<u>(2)</u>	11/13/2015		M <u>(1)</u>		1,929	11/13/2015	11/13/2015	Ordinary Shares	1,929

## **Reporting Owners**

Reporting Owner Name / Addre	ess	Relationships						
	Director	10% Owner	Officer	Other				
FOUSE JACQUALYN A C/O PERRIGO COMPANY 515 EASTERN AVENUE ALLEGAN, MI 49010	X							
Signatures								
/s/ Jacqualyn Fouse	11/16/2015							
<u>**</u> Signature of	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) Vesting of service-based restricted stock units granted on November 13, 2014.
- (2) Each Restricted Stock Unit represents a contingent right to receive one share of Perrigo Company plc ordinary shares.

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.

Reporting Person