## Edgar Filing: PERRIGO Co plc - Form 4

PERRIGO C Form 4 March 01, 20									
FORM	14						-	PPROVAL	
	UNITED		RITIES A ashington,			COMMISSION	OMB Number:	3235-0287	
Check th if no long							Expires:	January 31,	
subject to	IENT OF CHA	F CHANGES IN BENEFICIAL OWNER				Estimated	2005 average		
Section 1		SECURITIES						burden hours per	
Form 4 o							response	•	
Form 5 obligation	-	suant to Section				-			
may cont			•	•	<b>•</b> •	of 1935 or Sectio	n		
See Instru		30(h) of the l	nvestment	Company	y Act of 19	040			
1(b).									
(Print or Type I	Responses)								
1. Name and Address of Reporting Person _       2. Issuer Name and Ticker or Trading       5. Relationship of Issuer         HENDRICKSON JOHN T       Symbol       Issuer						Reporting Person(s) to			
HENDRICK	XSON JOHN I	Symbol				155001			
		PERR	IGO Co pl	c [PRGO]		(Check all applicable)			
(Last)	(First) (N	fiddle) 3. Date	of Earliest Tr	ransaction		× ×	11	,	
		(Month/Day/Year)			Director		6 Owner		
C/O PERRI	515 02/26/	02/26/2016			X_ Officer (give title Other (specify below) below)				
EASTERN	AVENUE						President		
	4. If An	4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check				
	Filed(M				Applicable Line)				
						_X_ Form filed by			
ALLEGAN	, MI 49010					Person	More than One R	eporung	
(City)	(State)	(Zip) Ta			• • •		0 5 6 1		
(,)	(21111)		ble I - Non-L	Jerivative S	Securities Ac	equired, Disposed o		-	
1.Title of	2. Transaction Date		3.	4. Securi		5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year)		Transacti Code	onAcquired Disposed		Securities	Form: Direct (D) or	Indirect Beneficial	
(IIIsu. 5)		any (Month/Day/Year				Beneficially Owned	Indirect (I)	Ownership	
		(intendit Duy) i cu	) (11501.0)	(11541.5,	( und 5)	Following	(Instr. 4)	(Instr. 4)	
					(A)	Reported			
					(A) or	Transaction(s)			
			Code V	Amount		(Instr. 3 and 4)			
Ordinary						9,879	T	By Trust	
Shares						9,079	Ι	(1)	

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)

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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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units	(2)	02/26/2016		A <u>(3)</u>	3,869	02/26/2019	02/26/2019	Ordinary Shares	3,869
Employee Stock Option Right to Buy	\$ 129.23	02/26/2016		A	21,943	<u>(4)</u>	02/26/2026	Ordinary Shares	21,943

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
I O	Director	10% Owner	Officer President	Other			
HENDRICKSON JOHN T C/O PERRIGO COMPANY 515 EASTERN AVENUE ALLEGAN, MI 49010			President				
Signatures							
/s/ Dave McConnell, attorney-i Hendrickson	n-fact for	Mr.	(	)3/01/2016			

<u>\*\*</u>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).
- (1) Shares held in the John T. Hendrickson Trust, of which the reporting person is the Trustee.
- (2) Each Restricted Stock Unit represents a contingent right to receive one ordinary share of Perrigo Company plc.
- (3) Restricted Stock Units awarded for capacity as President, pursuant to the 2013 Long-term Incentive Plan.
- (4) Exercisable in 3 equal annual installments beginning 2/26/2017.

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.