

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>CURTIS GEOFFREY M.</u>  (Last) (First) (Middle)  <u>C/O HORIZON PHARMA PLC</u> <u>CONNAUGHT HOUSE, 1ST FL, 1 BURLINGTON RD</u>  (Street) <u>DUBLIN L2 4</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Horizon Pharma plc [ HZNP ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>EVP, Corporate Affairs, CCO</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>01/04/2019</u>	
		6. Individual or Joint/Group Filing (Check Applicable Line)  <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Ordinary Shares	01/05/2019		M		12,944	A	(1)	41,811 <sup>(2)</sup>	D	
Ordinary Shares	01/05/2019		F		4,109	D	\$20.39	37,702	D	
Ordinary Shares								420	I	By spouse

**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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Restricted Stock Units (RSU)	(1)	01/04/2019		A		36,782		(3)	(3)	Ordinary Shares	36,782	\$0.00	36,782	D	
Restricted Stock Units (RSU)	(1)	01/05/2019		M		12,944		(4)	(4)	Ordinary Shares	12,944	\$0.00	25,890	D	

**Explanation of Responses:**

- Each RSU represents a contingent right to receive one ordinary share of the Issuer.
- Includes 736 ordinary shares of the Issuer acquired by the reporting person on November 30, 2018 pursuant to an employee stock purchase program.
- The RSU's vest 1/3rd annually on each anniversary of January 5, 2019.
- The RSU's vest 1/3rd annually on each anniversary of January 5, 2018.

**Remarks:**

/s/ Miles W. McHugh, 01/08/2019  
Attorney-in-Fact

\*\* Signature of Reporting Person Date

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

\* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.