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JAZZ PHARMACEUTICALS INC

Form 3 May 31, 2007

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

SECURITIES

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person *

À COLELLA SAMUEL D

(Last)

(City)

(Instr. 4)

1. Title of Security

C/O VERSANT

(First)

(Middle)

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

Statement

(Month/Day/Year)

05/31/2007

JAZZ PHARMACEUTICALS INC [JAZZ]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

(Check all applicable)

10% Owner _X_ Director Officer Other (give title below) (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line)

X Form filed by One Reporting Person

Form filed by More than One

Reporting Person

HILL ROAD, 4-210 (Street)

VENTURES, 3000 SAND

(State)

MENLO PARK. CAÂ 94025

(Zip)

Table I - Non-Derivative Securities Beneficially Owned

2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership

4. Nature of Indirect Beneficial

Ownership Form: (Instr. 5)

Direct (D) or Indirect (I) (Instr. 5)

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

Date

Exercisable

3. Title and Amount of Securities Underlying Derivative Security

4. Conversion or Exercise Price of

5. Ownership Form of Derivative

6. Nature of Indirect Beneficial Ownership (Instr. 5)

(Instr. 4) **Expiration Title**

Date

Amount or Number of Derivative Security: Security Direct (D)

1

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				Shares		or Indirect (I) (Instr. 5)	
Series A Preferred Stock	(1)	(1)	Common Stock	670,912	\$ 0 (1)	I	0 (2) (4)
Series B Preferred Stock	(1)	(1)	Common	563,249	\$ 0 (1)	I	0 (3) (4)

Reporting Owners

Reporting Owner Name / Address		Relationships		
	Director	10% Owner	Officer	Othe
COLELLA SAMUEL D C/O VERSANT VENTURES 3000 SAND HILL ROAD, 4-210	ÂΧ	Â	Â	Â
MENLO PARK. CA 94025				

Signatures

/s/ Samuel D.
Collela

**Signature of Reporting Person

O5/31/2007

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).
- (1) The Issuer's Preferred Stock will automatically convert into Common Stock on a one-for-one basis upon the closing of the Issuer's initial public offering and has no expiration date.
- (2) Consists of 652,693 shares of Series A Preferred Stock held by Versant Venture Capital II, L.P., 12,386 shares of Series A Preferred Stock held by Versant Affiliates Fund II-A, L.P. and 5,833 shares of Series A Preferred Stock held by Versant Side Fund II, L.P.
- (3) Consists of 547,954 shares of Series B Preferred Stock held by Versant Venture Capital II, L.P., 10,398 shares of Series B Preferred Stock held by Versant Affiliates Fund II-A, L.P. and 4,897 shares of Series B Preferred Stock held by Versant Side Fund II, L.P.
- Mr. Colella is a managing member of Versant Ventures II, LLC, which is the general partner of each of Versant Venture Capital II, L.P.,
- (4) Versant Affiliates Fund II-A, L.P. and Versant Side Fund II, L.P., or the Versant Funds, and is deemed to have shared voting and investment power over the shares held by the Versant Funds. Mr. Colella disclaims beneficial ownership of the shares held by the Versant Funds, except to the extent of his pecuniary interest therein.

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 Owners 2