FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Stejbach Mark | | | | | | Alkermes plc. [ALKS] | | | | | | | | | | eck all appli Direct | cable) or | g Pers | 10% Ow | /ner |
|--|---|--|---|--------|------------------|---|---|-------|----------|------------------------------------|------|--|----------------------------------|--|--|---|---|----------------|--|---|
| (Last) (First) (Middle) 852 WINTER ST. | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/15/2015 | | | | | | | | | - | below | (give title) ief Comm | nercia | Other (s below) al Officer | pecify |
| (Street) WALTHAM MA 02451 (City) (State) (Zip) | | | | | - 4. I | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | |) X Form | lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) | (5 | | ole I - No | n-Deri | vativ | e Se | curit | ies A | cai | uired. | Disi | oosed o | f. or I | Ben | eficial | v Owne | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/Date) | | | | | saction | ar) i | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | (A) or | 5. Amou Securiti Benefic Owned | int of es ially Following | Form (D) o | n: Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | | Code | v | Amount | (A (D |) or) | Price | Reporte Transac (Instr. 3 | tion(s) | | | (Instr. 4) |
| Ordinary Shares 04/15/ | | | | | | 2015 | | | | M ⁽¹⁾ | | 5,780 | A \$ | | \$17.3 | 16 | 6,544 | | D | |
| Ordinary Shares 04/15/3 | | | | | | ′2015 | | | | | | 1,591 | | D | \$62.8 | 3 14 | 14,953 | | D | |
| | | ٦ | Гable II - | | | | | | | | | osed of, onvertil | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | | Transaction Code (Instr. | | of | | Date Exe piration I onth/Day | Date | | Amou Secur Under Deriva | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership ct (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Da Ex | ite ercisable | | Expiration Date | Title | | Amount or Number of Shares | | | | | |
| Employee Stock Option (Right to | \$17.3 | 04/15/2015 | | | M ⁽¹⁾ | | | 5,780 | 03/ | /07/2013 ⁽ | (3) | 03/07/2022 | Ordina Share | | 5,780 | \$0 | 88,440 | 0 | D | |

Explanation of Responses:

Buy)

- 1. This option exercise was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.
- 2. This stock swap was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.
- $3. \ The option becomes exercisable in equal annual installments over a four year period, at the rate of 25\% per year commencing on <math>3/7/13$.

/s/ Jennifer Baptiste, attorneyin-fact for Mark Stejbach

04/17/2015

** 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.