FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

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1. Name and Address of Reporting Person* Pugh Gordon G					2. Issuer Name and Ticker or Trading Symbol Alkermes plc. [ALKS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
- Last Gordon G				_									v	Officer (circo title Other (coe					
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 06/02/2014									X Officer (give title Other (specify below) SVP, COO & CRO, Alkermes, Inc.						
852 WINTER ST.																			
(Street)			_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
WALTHAM MA 02451				X Form filed by One Reporting Person												on			
				-	Form filed by More than One Reporting Person														
(City)	(S	(State) (Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y				Execution Date,		ate,			Acquired (A) or (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following				7. Nature of Indirect Beneficial Ownership				
						Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Ordinary	Shares			06/02/20	014				M ⁽¹⁾		16,000	Α	\$15	.95	95 71,77		777 D		
Ordinary	Shares			06/02/20	02/2014				S ⁽²⁾		16,000	D	\$45.3	397 ⁽³⁾	397 ⁽³⁾ 55,777		77 D		
Ordinary Shares														5,000			I	Gordon G. Pugh Revocable Trust - 2012	
Ordinary Shares														15,000		I		Nancy E. Pugh Revocable Trust - 2012	
		٦	Table								posed of , converti				Owned				
Derivative Conversion Date Executity Or Exercise (Month/Day/Year) if an		Execu if any	eemed 4. ution Date, Tra		5. Num ansaction of ode (Instr. Derivat		umber vative urities uired or oosed 0) (Instr	6. Date Exer Expiration D (Month/Day/		rcisable and 7. Title and Amount of		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exer	e rcisable	Expiration Date	Title	Amo or Nun of Sha	nber					
Non Qualified Stock Option (Right to Buy)	\$15.95	06/02/2014			M ⁽¹⁾			16,000)	(4)	06/01/2017	Ordina Share		000	\$0	5,79	5,794		

Explanation of Responses:

- 1. This option exercise was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.
- $2. \ This \ sale \ was \ effected \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ by \ the \ reporting \ person.$
- 3. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$45.00 to \$45.74. Full information regarding the number of shares sold at each separate price can be furnished to the SEC staff upon request.
- 4. These options are fully vested in accordance with their terms.

/s/ Jennifer Baptiste, attorneyin-fact for Gordon G. Pugh

06/03/2014

** 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.