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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL									
OMB Number: 3235-0287									
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1. Name and Address of Reporting Person* NAVARRE CHRISTOPHE			2. Issuer Name and Ticker or Trading Symbol <u>AVADEL PHARMACEUTICALS PLC</u> [AVDL]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify below) below)
(Last) (First) (Middle) BLOCK 10-1, BLANCHARDSTOWN CORPORATE PARK, BALLYCOOLIN	3. Date of Earliest Transaction (Month/Day/Year) 06/28/2017	Delow)		
			4. If Amendment, Date of Original Filed (Month/Day/Year) 06/30/2017	6. Individual or Joint/Group Filing (Check Applicable Line)
(Street)				X Form filed by One Reporting Person
DUBLIN L2 15		Form filed by More than One Reporting Person		
(Citv)	(State)	(Zip)		

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

- 1												
	1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	

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. Transa Code (1 8)		of		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	Amount or Number of Shares				
Stock Option (right to buy) ⁽¹⁾	\$10.51 ⁽¹⁾	06/28/2017		A		35,000		06/28/2018 ⁽¹⁾	06/28/2022	ADSs ⁽²⁾	35,000	\$10.51	35,000	D	

Explanation of Responses:

1. Options become exercisable as to all 35,000 ADSs on the first anniversary of the 06/28/2017 grant date.

2. The issuer's "ADSs" are American Depositary Shares, with each ADS representing one ordinary share, nominal value \$0.01 per share, of the issuer; ADSs may be represented by American Depositary Receipts.

Remarks:

This amendment to the Form 4 filed by the reporting person on June 30, 2017 (the "Previous Form 4") is being filed solely to correct the number of derivative securities acquired and the number of derivative securities beneficially owned following the transaction reported in Columns 5 and 9 of Table II of the Previous Form 4. The number of derivative securities in the Previous Form 4 was incorrectly listed as 30,000 and has been corrected to 35,000.

<u>/s/ Phillandas T. Thompson, as</u> <u>attorney-in-fact for Christophe</u> 03/02/2018 <u>Navarre</u>

** 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.