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## FORM 4

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

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Line)

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Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMEN	IT OF CHANGES IN BENEFICIAL OWNI	ERSHIP	OMB Number: Estimated average	3235-0287 burden		
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		hours per response	: 0.5		
1. Name and Address of Reporting Person* THERO JOHN F		2. Issuer Name <b>and</b> Ticker or Trading Symbol AMARIN CORP PLC\UK [ AMRN ]	5. Relationship of I (Check all applicat	Reporting Person(s) ple)	to Issuer		
ITERO JOHN F			X Director	10	% Owner		
(Last) (First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	X Officer (gi below)		her (specify low)		
C/O AMARIN PHARMA, INC.		11/30/2017	President and CEO				
1430 ROUTE 206							
		4 If Amendment Date of Original Filed (Month/Day/Year)	The individual or Jou	nt/Group Filing (Che	ck Annlicable		

BEDMINSTER	NJ	07921
(City)	(State)	(Zip)

Table I - Non-Derivative Securities	Acquired	Disnosed o	for	Beneficially	/ Owned
Table I - NUI-Derivative Securities	Acquireu,	Disposed 0	, UI	Denencially	/ Owneu

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially	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	Transaction(s) (Instr. 3 and 4)		(11311.4)
Ordinary Shares <sup>(1)</sup>	11/30/2017		Р		10,000	A	\$3.2446(2)	1,135,003 <sup>(3)</sup>	D	

## 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 ( 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) 6. Date Exercisable at Expiration Date (Month/Day/Year)   0 Disposed of (D) (Instr. 3, 4 and 5)   (A) (D)   Date Exercisable Expiration Date Exercisable		ate Amount of Year) Securities			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				Expiration Date	Title	Amount or Number of Shares			

## Explanation of Responses:

1. The Ordinary Shares may be represented by American Depositary Shares, each of which represents one Ordinary Share.

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$3.2192 to \$3.2699, inclusive. The Reporting Person has provided the Issuer, and undertakes to provide to the staff of the Securities and Exchange Commission or any security holder of the Issuer, upon request, full information regarding the number of American Depositary Shares sold at each separate price.

3. Please see the section titled "Remarks" below for additional information.

## **Remarks:**

As of the date of this Form 4, the Reporting Person owns or holds the right to acquire an aggregate of 9,587,844 Ordinary Shares of the Issuer in the form of (i) stock options and Restricted Stock Units granted under the Amarin Corporation plc 2002 Stock Option Plan and the Plan and (ii) 1,135,003 Ordinary Shares.

/s/ John F. Thero

Date

\*\* Signature of Reporting Person

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.

Form filed by One Reporting Person

Form filed by More than One Reporting Person

12/04/2017