FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN RENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|

| OIVID APPR | OVAL | | | | |
|----------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0287 | | | | |
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| hours per response: | 0.5 | | | | |
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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equits securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(a). See Instruction 10

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(c). Se | ee Instruction 1 | 0. | | | | | | | | | | | | | | | | | |
|--|------------------|-----------|---|---|---|---|--|------|---|--------------------|---|--|--|---|--|--|---------|-------------|--------|
| Name and Address of Reporting Person* Palczuk Linda | | | | 2. Issuer Name and Ticker or Trading Symbol AVADEL PHARMACEUTICALS PLC | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | | | | |
| (Line) (First) (Middle) | | | AVDL] | | | | | | | | _ | er (give title | | Other (s | | | | | |
| (Last) (First) (Middle) C/O AVADEL PHARMACEUTICALS PLC 10 EARLSFORT TERRACE | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/21/2025 | | | | | | | | | | | | | , | | |
| | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | pplicable | | | | | | | | |
| (Street) DUBLIN | 12 L2 | Г | 002 T38 | 80 | | | | | | | | | | V | _ | filed by On | | • | |
| , | | | | | | | | | | | | | | | Form Perso | filed by Mo on | re thai | n One Rep | orting |
| (City) | (Sta | ate) (2 | Zip) | | | | | | | | | | | | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secu | rities | Acq | uired, | Dis | posed of | , or E | Bene | ficial | ly Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | | Securit Benefic | ities Fo icially (D d Following (I) | | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | | Code | v | Amount | (A) (D) | or F | Price | Transa | Transaction(s) (Instr. 3 and 4) | | | (111511. 4) | |
| Ordinary Shares 01/21/2 | | | | | 2025 | | | | P | | 5,000 | A | . 9 | \$7.928 | 7.928 67,900 | | | D | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Conversion or Exercise Price of Derivative Security (Instr. 3) 2. Conversion Date Execution Date (Month/Day/Year) if any (Month/Day/Year) Security | | ion Date, | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | S (I | . Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amo or Num of Shar | ber | | | | | |

Explanation of Responses:

/s/ Jerad G. Seurer, as Attorney-in-Fact

01/22/2025

** 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.