

# SECURITIES AND EXCHANGE COMMISSION

## FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: **2013-01-28** | Period of Report: **2013-01-25**  
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(HTML Version on [secdatabase.com](http://secdatabase.com))

### REPORTING OWNER

**Wendell Amy McBride**

CIK: **1400568**

Type: **4** | Act: **34** | File No.: **001-33259** | Film No.: **13551715**

Mailing Address

*COVIDIEN LTD.*

*15 HAMPSHIRE STREET*

*MANSFIELD MA 02048*

### ISSUER

**Covidien plc**

CIK: **1385187** | IRS No.: **980624794** | Fiscal Year End: **0930**

SIC: **3841** Surgical & medical instruments & apparatus

Mailing Address

*20 ON HATCH*

*LOWER HATCH STREET*

*DUBLIN L2 DUBLIN 2*

Business Address

*20 ON HATCH*

*LOWER HATCH STREET*

*DUBLIN L2 DUBLIN 2*

*353 1 438-1700*

# FORM 4

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

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

OMB APPROVAL	
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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person <b>Wendell Amy McBride</b>			2. Issuer Name and Ticker or Trading Symbol <b>Covidiem plc [COV]</b>			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) <b>Senior Vice President</b>		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) <b>01/25/2013</b>			6. Individual or Joint/Group Filing (Check applicable line) <input checked="" type="checkbox"/> Form Filed by One Reporting Person <input type="checkbox"/> Form Filed by More than One Reporting Person		
C/O COVIDIEN, 15 HAMPSHIRE STREET			4. If Amendment, Date Original Filed(Month/Day/Year)					
(Street) <b>MANSFIELD, MA 02048</b>								
(City)	(State)	(Zip)						

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Ordinary Shares	01/25/2013		M		15,000	A	\$34.15	65,856	D	
Ordinary Shares	01/25/2013		S		15,000 <sup>(1)</sup>	D	\$63.5	50,856	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. 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 (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 of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Stock Option (Right to Buy)	\$34.15	01/25/2013		M			15,000	(2)	12/01/2018	Ordinary Shares	15,000	\$ 0	45,585	D	

**Explanation of Responses:**

- Shares sold pursuant to an existing Rule 10b5-1 trading plan.
- Options become exercisable in equal installments on each of the first, second, third and fourth anniversary of the grant date.

## Signatures

By: John W. Kapples, Attorney in Fact

\*\* Signature of Reporting Person

01/28/2013

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.**