FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

**OMB APPROVAL** OMB Number: Estimated average burden

0.5

hours per response:

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

																F. Deletionship of Departing Developed to Jersey					
Name and Address of Reporting Person*     JOHNSON JOHN						2. Issuer Name <b>and</b> Ticker or Trading Symbol  Sucampo Pharmaceuticals, Inc. [ SCMP ]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
ACTITIOOTI ACTITI															Director			10% Ov	vner		
(Last) (First) (Middle) 805 KING FARM BLVD, SUITE 550					3. Date of Earliest Transaction (Month/Day/Year) 02/13/2018									Officer below)	(give title		Other (s below)	pecify			
		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable									
(Street)  ROCKVILLE MD 20850					, , , , , , , , , , , , , , , , , , , ,									Line)  X Form filed by One Reporting Person							
					-								Form filed by More than One Reporting Person								
(City)	(City) (State) (Zip)														. 3.3311						
		Tab	le I - Nor	ı-Deri	vativ	e Se	curit	ties Ac	quired,	Dis	osed o	f, or	3ene	ficiall	y Owned						
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						ear)   i	2A. Deemed Execution Date, If any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)		(A) or 3, 4 and	5. Amour Securitie Beneficia Owned F	s ally ollowing	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
										v	Amount	ount (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common Stock, Class A 02/13/						2018		D		5,1300	5,130 <sup>(1)</sup> D		\$18		0		D				
		-	Table II -												Owned						
				(e.g.,	puts,	call	s, wa	arrants	, optior	ıs, c	onvertil	ble se	curi	ies)							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution I if any (Month/Day	Date,		ansaction ode (Instr.		umber vative urities uired or oosed O) (Instr. and 5)	6. Date Exercisa Expiration Date (Month/Day/Year		of Secur		urities lying tive Se	curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
				Ī										mount							
													O N	r umber							
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	o S	f hares							
Director Stock Option (right to buy)	\$13.92	02/13/2018			D			30,000	(2)		2/10/2024	Comm	on 3	0,000	\$4.08	0		D			
Director Stock Option (right to buy)	\$16.23	02/13/2018			D			20,000	(2)	0	5/29/2025	Comn Stoc		0,000	\$1.77	0		D			
Director							1														

## **Explanation of Responses:**

\$10.3

Stock Option

(right to buy)

1. This common stock was purchased for \$18.00 per share in cash, subject to any required withholding of taxes and without interest, upon the effective time of the merger of Sun Acquisition Co.with and into Sucampo Pharmaceuticals, Inc. pursuant to that certain Agreement and Plan of Merger by and among Mallinckrodt plc, Sun Acquisition Co. and Sucampo Pharmaceuticals, Inc. dated December 23, 2017 (the "Merger Agreement"). The common stock consisted of restricted stock units that were accelerated as a result of the Merger Agreement.

(2)

10,000

2. This option was cancelled and converted into the right to receive in cash the amount per share by which \$18.00 exceeds the exercise price of the option, subject to any applicable tax witholdings (such amount, the "Option Spread"), upon the effective time of the merger of Sun Acquisition Co.with and into Sucampo Pharmaceuticals, Inc. pursuant to the Merger Agreement. The Option Spread for the unvested portion of the option, if any, will be paid in accordance with the schedule described in the Merger Agreement.

/s/ John H. Johnson

Common

Stock

05/29/2025

02/13/2018

0

D

\*\* Signature of Reporting Person

10,000

\$7.7

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).

02/13/2018

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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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.