

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
OMB Number:	3235-0104
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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. Name and Address of Reporting Person* <u>Bracebridge Capital, LLC</u> <hr/> (Last) (First) (Middle) 888 BOYLSTON STREET, 15TH FLOOR <hr/> (Street) BOSTON MA 02199 <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 06/16/2022	3. Issuer Name and Ticker or Trading Symbol <u>Mallinckrodt plc [ MNKPF ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) <hr/> 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	2,033,257	I	See footnotes <sup>(1)(2)</sup>

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person\*  
Bracebridge Capital, LLC  


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 (Last) (First) (Middle)  
 888 BOYLSTON STREET, 15TH FLOOR  


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 (Street)  
 BOSTON MA 02199  


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 (City) (State) (Zip)

1. Name and Address of Reporting Person\*  
FFI III S.a.r.l.  


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 (Last) (First) (Middle)  
 C/O BRACEBRIDGE CAPITAL, LLC  
 888 BOYLSTON STREET, 15TH FLOOR  


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 (Street)  
 BOSTON MA 02199  


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 (City) (State) (Zip)

1. Name and Address of Reporting Person\*  
FYI S.a.r.l.

(Last) (First) (Middle)

C/O BRACEBRIDGE CAPITAL, LLC  
888 BOYLSTON STREET, 15TH FLOOR

(Street)  
BOSTON MA 02199

(City) (State) (Zip)

1. Name and Address of Reporting Person\*

Olifant Luxco S.a r.l.

(Last) (First) (Middle)

C/O BRACEBRIDGE CAPITAL, LLC  
888 BOYLSTON STREET, 15TH FLOOR

(Street)  
BOSTON MA 02199

(City) (State) (Zip)

**Explanation of Responses:**

1. 2,033,257 of the total reported shares of common stock, \$0.01 par value per share ("Common Stock"), of the Issuer are owned directly as follows: (i) 1,477,971 shares of Common Stock are owned directly by FFI III S.a r.l. ("FFI"), (ii) 284,656 shares of Common Stock are owned directly by FYI S.a r.l. ("FYI"), and (iii) 270,630 shares of Common Stock are owned directly by Olifant Luxco S.a r.l. (together with FFI and FYI, the "Bracebridge Funds"). Bracebridge Capital, LLC (the "Investment Manager") is the investment manager of each of the Bracebridge Funds, and has the authority to vote and dispose of all the shares of Common Stock reflected herein.

2. Each of the Bracebridge Funds and the Investment Manager disclaims beneficial ownership of the shares of Common Stock except to the extent of any pecuniary interest therein, if any, and this report shall not be deemed an admission that the Reporting Persons are the beneficial owners of the shares of Common Stock reported herein for purposes of Section 16 of the Securities Exchange Act of 1934 or for any other purpose.

/s/ Bracebridge Capital,  
LLC, By John N. Spinney,  
Jr., Authorized  
Representative

06/24/2022

/s/ FFI III S.a r.l., By John  
N. Spinney, Jr., Authorized  
Representative

06/24/2022

/s/ FYI S.a r.l., Ltd., By  
John N. Spinney, Jr.,  
Authorized Representative

06/24/2022

/s/ Olifant Luxco S.a r.l.,  
By John N. Spinney, Jr.,  
Authorized Representative

06/24/2022

\*\* 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 5 (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.**