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ALLERGAN Form 4 February 01, FORM Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru- 1(b).	2008 4 UNITED S s box er STATEM 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.	W ENT OF CHA uant to Section	ashington, NGES IN SECUR 16(a) of the Utility Hold	D.C. 205 BENEFI ITIES e Securiti ling Com	549 CIA les Ez ipany	L OW tchang Act o	COMMISSION NERSHIP OF ge Act of 1934, f 1935 or Sectio 40	N OMB Number: Expires: Estimated burden hou response	irs per	
1. Name and Address of Reporting Person <u>*</u> Whitcup Scott M			2. Issuer Name and Ticker or Trading Symbol ALLERGAN INC [(AGN)]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 2525 DUPONT DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 01/30/2008				Director 10% Owner X Officer (give title Other (specify below) below) Executive Vice President, R&D			
			4. If Amendment, Date Original Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State) (Zip) Ta	ble I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if		Code (Instr. 8)	TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial (I) Ownership	
Common Stock	01/30/2008		F	$\begin{array}{c} \text{Amount} \\ 2,168 \\ \underline{(1)} \end{array}$	(D) D	Price \$64	13,678.41	D		
Common Stock							1,400.0542 <u>(2)</u>	I	By 401(k)	
Common Stock							1,739.0666 <u>(3)</u>	I	By ESOP	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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number.

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. Transactic Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration E (Month/Day e s	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
_				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Repo	rting O	wners		Relation	nchine						

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Whitcup Scott M 2525 DUPONT DRIVE IRVINE, CA 92612			Executive Vice President, R&D				
Signatures							
By: Matthew J. Maletta, Attorney-in-Fact	02/01/2008						
**Signature of Reporting Person		Da	te				
Evaluation of Responses:							

Explanation of Responses:

- * 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).

Exempt disposition to the issuer, effective 1/30/2008, of a number of shares determined to be sufficient to satisfy tax withholding
(1) obligations resulting from the lapse of restrictions on a portion of an exempt award of 6,000 shares of restricted stock granted on 1/30/2004.

- (2) Shares allocated to reporting person's SIP account as of reporting date.
- (3) Shares allocated to the reporting person's ESOP account as of reporting date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.