#### GALLAGHER MICHAEL R

Form 4 May 03, 2007

## FORM 4

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

OMB Number:

3235-0287

0.5

Check this box if no longer

subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

January 31, Expires: 2005 Estimated average

burden hours per

response...

**OMB APPROVAL** 

Form 5 obligations may continue. See Instruction

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(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* GALLAGHER MICHAEL R

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

(First) (Last)

(Middle)

ALLERGAN INC [(AGN)] 3. Date of Earliest Transaction

(Check all applicable)

2525 DUPONT DRIVE

(Month/Day/Year)

X\_ Director

10% Owner Officer (give title Other (specify

05/01/2007

below)

4. If Amendment, Date Original Filed(Month/Day/Year)

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

**IRVINE, CA 92612** 

(City) (State) (Zip)

(Street)

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

1.Title of Security (Instr. 3)

(Month/Day/Year) Execution Date, if

2. Transaction Date 2A. Deemed

(Month/Day/Year)

4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership

(A)

Reported Transaction(s)

(Instr. 3 and 4) Price

Common Stock

05/01/2007

Code V Amount (D) 7,200 A (1)

\$0 25,400 D

(Instr. 4)

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

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 control number.

SEC 1474 (9-02)

(Instr. 4)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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. 5. Number Transaction Derivative Code Securities (Instr. 8) 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 Underlying Securities (Instr. 3 and 4)	
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shares
Nonemployee Director Stock Option (Right to Buy)	\$ 121.2 (2)	05/01/2007		A	5,700	(3)	05/01/2017	Common Stock	5,700

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
GALLAGHER MICHAEL R 2525 DUPONT DRIVE IRVINE, CA 92612	X					

## **Signatures**

By: Matthew J. Maletta, Attorney-in-Fact

05/03/2007

\*\*Signature of Reporting Person Date

# **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).
- Restricted Stock granted under the Allergan, Inc. 2003 Nonemployee Director Equity Incentive Plan, as amended. Stock vests at the rate of 2,400 shares per year as of the date of each of the next three regular annual meeting of stockholders of Allergan, Inc. at which directors are to be elected following the date of grant.
- (2) The per share exercise price is the closing price of Allergan common stock as of April 30, 2007.
- (3) Option is fully vested and exercisable on the date of the next regular annual meeting of stockholders of Allergan, Inc. at which directors are to be elected following the date of grant.

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.

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