Edgar Filing: ALLERGAN INC - Form 4

ALLERGAN	N INC										
Form 4	012										
August 16, 2											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB	PROVAL 3235-0287			
if no lon; subject to Section 1 Form 4 c Form 5 obligatio may con	Washington, D.C. 20549Number:Ck this box o longer ect to ion 16. n 4 or n 5STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESExpires:JanuarEstimated average burden hours per responseEstimated average burden hours per responseEstimated average burden hours per responseFiled 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 1940Section 17(a)										
(Print or Type]	Responses)										
			2. Issuer Name and Ticker or Trading Symbol ALLERGAN INC [AGN]				0	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (I	Middle)			-	1		(Check	k all applicable)	
2525 DUPONT DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 08/15/2013					_X_ Director10% Owner Officer (give titleOther (specify below)			
			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person				
IRVINE, C.	A 92612							Form filed by M Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Secui	rities Acqu	ired, Disposed of,	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	08/15/2013			Code V M	Amount 1,000 (1)	(D) A	Price \$ 51.715	(Instr. 3 and 4) 11,142	D		
Common Stock	08/15/2013			S	2,000 (1)	D	\$ 89.89	9,142 <u>(2)</u> <u>(3)</u>	D		

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.

 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. Transactio Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and J Underlying S (Instr. 3 and	Secu
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	An or Nu of Sh
Nonemployee Director Stock Option (Right to Buy)	\$ 51.715	08/15/2013		М	1,000 (1)	05/02/2007 <u>(4)</u>	05/02/2016	Common Stock	1

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Jones Trevor M 2525 DUPONT DRIVE IRVINE, CA 92612	Х						
Signatures							
/s/ Matthew J. Maletta. Attorne	v-in-Fact	for Trevor I	М.				

Jones	08/16/2013
<u>**</u> 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).
- (1) The transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 Trading Plan adopted by the reporting person on November 22, 2012.
- (2) Includes 6,942 shares of the Issuer's common stock underlying the RSUs awarded.
- (3) Includes shares acquired pursuant to dividend equivalent rights attached to RSU previously granted to the Reporting Person.
- (4) Option is fully vested and exercisable on the one year (1) year anniversary of its 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.