JOYCE R TODD Form 4 August 15, 2005

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

if no longer subject to Section 16. Form 4 or

Check this box

January 31, Expires: 2005

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

Estimated average burden hours per response... 0.5

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 Add JOYCE R TO	ress of Reporting Pers	Symbol	Tame and Ticker or Trading N PHARMACEUTICALS I]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O WATSO! PHARMACE! BONNIE CIR	UTICALS, INC.,	(Month/Day 08/12/200		Director 10% Owner X Officer (give title Other (specify below) VP, Corp. Controller & Treas.			
	(Street)	4. If Amend Filed(Month/	lment, Date Original /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			
CORONA, CA	A 92880			Person			
(City)	(State) (Zip	Table I	I - Non-Derivative Securities Ac	quired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	5. Amount of Securities Ownership Indirect Beneficially Form: Direct Beneficial Owned (D) or Ownership Following Indirect (I) (Instr. 4) Transaction(s) (Instr. 3 and 4)			
Common Stock (Restricted)	08/12/2005		A 1,000 A \$0	1,000 D			
Common Stock, par value \$0.0033				6,207 I Trust			

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

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SEC 1474 (9-02)

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. 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	(A) (D	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options to Purchase Common Stock (2)	\$ 35.11	08/12/2005		A	3,000	(3)	08/12/2015	Common Stock, par value \$0.0033	3,000

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

JOYCE R TODD C/O WATSON PHARMACEUTICALS, INC. 311 BONNIE CIRCLE CORONA, CA 92880

VP, Corp. Controller & Treas.

Signatures

/s/R. TODD JOYCE 08/15/2005

**Signature of Date
Reporting Person

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) These restricted shares of common stock, par value \$0.0033, were issued pursuant to the provisions of the Amendment and Restatement of the 2001 Incentive Award Plan of Watson Pharmaceuticals, Inc. (including, but not limited to, restrictions on transferability and certain forfeiture provisions concerning unvested restricted shares). The restricted shares vest (i) fifty percent on the second anniversary of the

Reporting Owners 2

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date of grant, and (ii) fifty percent on the fourth anniversary of the date of grant.

- (2) The options are to be incentive stock options to the extent permitted by law, and thereafter to be non-statutory stock options.
- (3) These stock options shall become exercisable in four equal annual installments commencing on August 12, 2006.

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.