#### WATSON PHARMACEUTICALS INC

Form 4 July 02, 2007

## FORM 4

### OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

Expires: January 31, 2005

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

Form 4 or 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

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

CHAO ALLEN			2. Issuer Name <b>and</b> Ticker or Trading  Symbol				ling	Issuer			
			WATSON PHARMACEUTICALS INC [WPI]				CALS	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)					_X_ Director 10% OwnerX_ Officer (give title Other (specify			
C/O WATSON				06/28/2007				below) below) Chairman, President & CEO			
PHARMACEUTICALS, INC., 311											
DOMNIE	BONNIE CIRCLE										
	(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
				Thed(World Day, Tear)				_X_ Form filed by One Reporting Person			
CORONA						Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Ta	ble I - Non	-Derivativ	e Secu	irities Acq	uired, Disposed	of, or Benefic	ially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)			3. 4. Securities Acquired (A Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or			(D)	Securities Beneficially Owned Following Reported Transaction(s)	urities Ownership Indirect efficially Form: Benefic ned Direct (D) Ownershowing or Indirect (Instr. 4 oorted (I) nsaction(s) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock, par value \$0.0033	06/28/2007			M	20,510	A	\$ 24.375	689,343	D		
Common Stock, par value \$0.0033	06/28/2007			M	79,490	A	\$ 24.375	768,833	D		
Common Stock, par	06/29/2007			F	5,958	D	\$ 32.53	762,875	D		

## Edgar Filing: WATSON PHARMACEUTICALS INC - Form 4

value \$0.0033			
Common Stock, par value \$0.0033	883,468	I	by Trust
Common Stock, par value \$0.0033	959,083	I	by Corporation
Common Stock, par value \$0.0033	1,418,661	I	by Partnership

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)

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. Transaction Code (Instr. 8)	5. Number of or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Underlying Secur (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Am or Nui of S
Non-Qualified Options to Purchase Common Stock	\$ 24.375	06/28/2007		M	79,490	07/17/2002	07/17/2007	Common Stock, par value \$0.0033	79
Incentive Stock Options	\$ 24.375	06/28/2007		M	20,510	07/17/2002	07/17/2007	Common Stock, par value \$0.0033	20

#### Edgar Filing: WATSON PHARMACEUTICALS INC - Form 4

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CHAO ALLEN

C/O WATSON PHARMACEUTICALS, INC. 311 BONNIE CIRCLE

X

Chairman, President & CEO

**Signatures** 

CORONA, CA 92880

/s/ALLEN 07/02/2007 CHAO

\*\*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).

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.

Reporting Owners 3