## Edgar Filing: PFIZER INC - Form 4

PFIZER INC											
Form 4											
July 17, 2007											
FORM 4			GEGU	DIFIER				Т	PPROVAL		
Check this boy	UNITED	STATES		RITIES A shington			E COMMISSIO	N OMB Number:	3235-0287		
if no longer								Expires:	January 31, 2005		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP C Section 16. Form 4 or									average urs per . 0.5		
Form 5 obligations may continue. See Instruction 1(b).	Section 17(	a) of the l	Public U	Jtility Hol	lding Cor		nge Act of 1934, of 1935 or Section 940				
(Print or Type Respo	onses)										
1. Name and Addres KINDLER JEFF		Person <sup>*</sup>	Symbol	er Name <b>an</b> R INC [P]		Trading	5. Relationship o Issuer				
(Last)	(First) (1	Middle)		-	-		(Che	eck all applicabl	e)		
PFIZER INC. ATT: CORPORATE SECRETARY, 235 EAST 42ND			3. Date of Earliest Transaction (Month/Day/Year) 07/13/2007				_X_ Director 10% Owner _X_ Officer (give title 0ther (specify below) below)				
STREET							Cr	nairman & CEO			
				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				
NEW YORK, N	Y 10017						Form filed by Person	More than One R	eporting		
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemo Execution any (Month/Da			Date, if TransactionAcquired (A) or Code Disposed of (D) ay/Year) (Instr. 8) (Instr. 3, 4 and 5) (A)			(A) or of (D) 4 and 5) (A)	5. Amount of Securities6. Ownership Form: Direct7. Nature of IndirectBeneficially Owned(D) or IndirectBeneficial BeneficialOwned Following Reported Transaction(s)(Instr. 4)				
				Code V	Amount	or (D) Price	(Instr. 3 and 4)				
					1 1110 0111	(2) 11100					
Reminder: Report of	n a separate line	e for each cl	ass of sec	urities bene	-		-				
					inforn requir	nation cont ed to resp lys a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab					posed of, or convertible	Beneficially Owned securities)	1			

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onof	Expiration Date	Underlying Securities	Derivativ

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	(Instr. 8) Sec Act (A) Dis of ( (Inst		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		Security (Instr. 5)
				Code V	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units SSP	<u>(1)</u>	07/13/2007		А		107		<u>(2)</u>	(2)	Common Stock	107	\$ 25.9

## **Reporting Owners**

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
KINDLER JEFFREY B PFIZER INC. ATT: CORPORATE SECRET. 235 EAST 42ND STREET NEW YORK, NY 10017	ARY	Х		Chairman & CEO					
Signatures									
By: Lawrence A. Fox, by power of atty.	07/17/	2007							

Date

\*\*Signature of 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) Each unit represents one phantom share of common stock.
- These units, which were acquired pursuant to the Pfizer Inc. Nonfunded Deferred Compensation and Supplemental Savings Plan, are
- (2) settled in cash following the reporting person's separation from service and may be transferred by the reporting person into an alternative investment account at any time.

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.