Edgar Filing: ALLERGAN INC - Form 4

ALLERGAN Form 4 April 03, 202												
FORM	1 /									OMB A	PPROVAL	L
	UNITED	STATES		RITIES A				E COMMISS	ION	OMB Number:	3235-0)287
Check th if no long subject to Section 1 Form 4 o Form 5	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934,							Expires:January 31, 2005Estimated average burden hours per response0.5		-		
obligatio may cont <i>See</i> Instru 1(b).	ns inue. Section 170	(a) of the l	Public U	tility Hol	lding	g Com		t of 1935 or S		I		
(Print or Type I	Responses)											
1. Name and Address of Reporting Person <u>*</u> Jones Trevor M			2. Issuer Name and Ticker or Trading Symbol ALLERGAN INC [AGN]					5. Relationship of Reporting Person(s) to Issuer				
									all applicabl	ll applicable)		
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)			X_ Director 10% Owner Officer (give title Other (specify						
2525 DUPONT DRIVE			04/01/2014					below) below)				
(Street)			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 Form filed by More than One Reporting 						
IRVINE, CA	A 92012							Person				
(City)	(State)	(Zip)	Tab	le I - Non-	Deriv	ative S	Securities A	Acquired, Dispo	sed of,	or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8) Code V	onAcq Disj (Ins	posed of tr. 3, 4	(A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Fc (E (I) (I)	Ownership orm: Direct)) or Indirect) hstr. 4)	7. Nature o Indirect Beneficial Ownershij (Instr. 4)	l
Reminder: Ren	ort on a separate line	e for each cl	ass of sec	urities bene	ficial	lv own	ed directly	or indirectly.				
					F ii r c	Persor nform require	ns who re ation con ed to resp ys a curre	spond to the c tained in this f ond unless the ntly valid OME	form a e form	re not	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	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Deriva
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Securi
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired			(Instr.

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	Derivative Security				(A) or Disposed (D) (Instr. 3, and 5)						
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	<u>(1)</u>	03/21/2014	А	V	2.77 (2)		(3)	(3)	Common Stock	2.77	\$ 12.
Phantom Stock Units	<u>(1)</u>	04/01/2014	А		60.61 		(3)	(3)	Common Stock	60.61	\$ 12
Phantom Stock Units	<u>(1)</u>	04/01/2014	А		15.15 <u>(4)</u>		(3)	(3)	Common Stock	15.15	\$ 12

Reporting Owners

Reporting Owner Name / Address		Relationsh		
I O	Director	10% Owner	Officer	Other
Jones Trevor M 2525 DUPONT DRIVE IRVINE, CA 92612	Х			
Signatures				
/s/ Matthew J. Maletta, Attorne	04/03/2014			

Malella, Alloiney Jones

**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).
- Converts to common stock on a 1-for-1 basis. (1)
- Phantom stock units acquired under the Allergan, Inc. Deferred Directors' Fee Program in lieu of cash for quarterly dividend, exempt (2)transaction under Rule 16a-11.
- Phantom stock units are to be settled 100% in common stock upon the Reporting Person's retirement as an Allergan, Inc. director. (3)
- Phantom stock units acquired under the Allergan, Inc. Deferred Directors' Fee Program in lieu of cash for quarterly portion of annual (4) retainer.

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.