Endicott David J. Form 3 October 11, 2011

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

OMB APPROVAL

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SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement ALLERGAN INC [AGN] Endicott David J. (Month/Day/Year) 10/01/2011 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) 2525 DUPONT DRIVE (Check all applicable) (Street) 6. Individual or Joint/Group Filing(Check Applicable Line) 10% Owner Director _X_ Form filed by One Reporting _X__ Officer Other Person (give title below) (specify below) IRVINE, CAÂ 92612 Form filed by More than One CVP and President, AGN Med US Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities 4. Nature of Indirect Beneficial 1. Title of Security (Instr. 4) Beneficially Owned Ownership Ownership (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) D Â Common Stock $20,186 \frac{(1)}{2}$ Common Stock 642.5057 (2) I By 401(k) Trust Common Stock 3,104.9626 (3) Ι by ESOP Trust Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. Persons who respond to the collection of information contained in this form are not

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

required to respond unless the form displays a

currently valid OMB control number.

1. Title of Derivative Security 2. Date Exercisable and 3. Title and Amount of 4. 6. Nature of Indirect (Instr. 4) **Expiration Date** Securities Underlying Ownership Beneficial Ownership Conversion (Month/Day/Year) or Exercise **Derivative Security** Form of (Instr. 5)

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	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	
Employee Stock Option (Right to Buy)	(4)	02/14/2018	Common Stock	54,500	\$ 64.47	D	Â
Employee Stock Option (Right to Buy)	(5)	02/20/2019	Common Stock	30,000	\$ 40.16	D	Â
Employee Stock Option (Right to Buy)	(6)	02/22/2020	Common Stock	37,500	\$ 59.13	D	Â
Employee Stock Option (Right to Buy)	(7)	02/17/2021	Common Stock	52,000	\$ 75.58	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships					
F-G	Director	10% Owner	Officer	Other		
Endicott David J. 2525 DUPONT DRIVE IRVINE Â CAÂ 92612	Â	Â	CVP and President, AGN Med US	Â		

Signatures

Matthew J. Maletta, Attorney-in-fact for David J. Endicott

10/10/2011

**Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) Includes 7, 577 shares of the Issuer's common stock underlying the Restricted Stock Units awarded to the reporting person.
- (2) Shares allocated to reporting person's SIP account as of reporting date.
- (3) Shares allocated to the reporting person's ESOP account as of reporting date.
- (4) The option became exercisable in four equal annual installment beginning February 14, 2009.
- (5) The option became exercisable in four equal annual installments beginning February 20, 2010. The remaining outstanding options under this award are reported in this filing.
- (6) The option became exercisable in four equal annual installments beginning February 22, 2011. The remaining outstanding options under this award are reported in this filing.
- (7) The option becomes exercisable in four equal annual installments beginning February 17, 2012.

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.

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