**ALLERGAN INC** 

Form 4 February 19, 2015

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL OMB** 3235-0287

Number:

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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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person * Hindman James M.			2. Issuer Name and Ticker or Trading Symbol ALLERGAN INC [AGN]					5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle) 2525 DUPONT DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 02/17/2015					(Check all applicable)  Director 10% OwnerX_ Officer (give title Other (specify below) below)  EVP, Finance & Bus. Dev., CFO				
IRVINE, C	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 Person						
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secui	rities Acqu	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	r) Execution	med on Date, if Day/Year)	3. Transaction Code (Instr. 8)	4. Securi on(A) or Do (Instr. 3,	(A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	02/17/2015			F	827 (1)	D	\$ 230.15	23,220.636	D			
Common Stock								6,495.2496 (2)	I	By 401(k)		
Common								6,044.7258 <sub>(3)</sub>	I	By ESOP		

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

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(3)

### Edgar Filing: ALLERGAN INC - Form 4

#### number.

# 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.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Date		Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative			Securities				(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date Expiration Exercisable Date	Expiration		or Number		
								of			
				Code V	(A) (D)				Shares		
				Code V	(A) $(D)$				Shares		

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Hindman James M. 2525 DUPONT DRIVE IRVINE, CA 92612

EVP, Finance & Bus. Dev., CFO

## **Signatures**

/s/ Matthew J. Maletta, atorney-in-fact for James M. Hindman

02/19/2015

\*\*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).
- (1) Exempt disposition to the issuer, effective 2/17/2015, of a number of shares determined to be sufficient to satisfy tax withholding obligations resulting from the lapse of restrictions of an exempt award of 2,200 shares of restricted stock granted on 2/17/2011.
- (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.

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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