

ADVANCED MEDICAL OPTICS INC
 Form 4
 February 03, 2009

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF 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 Person *
GAMCO INVESTORS, INC. ET AL

2. Issuer Name and Ticker or Trading Symbol

ADVANCED MEDICAL OPTICS INC [EYE]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)

01/13/2009

____ Director
 ____ Officer (give title below)
 10% Owner
 ____ Other (specify below)

ONE CORPORATE CENTER,

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)

____ Form filed by One Reporting Person
 Form filed by More than One Reporting Person

RYE, NY 10580

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 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 Ownership (Instr. 4) | |
|---------------------------------|--------------------------------------|--|--------------------------------|---|---|--|--|--|
| | | | | (A) or (D) | Price | | | |
| | | | | Code | V | Amount | | |
| Common Stock | 01/13/2009 | | P | 41,900 A | \$ 21.4971 | 213,900 | I | By: Investment Partnership I <u>(1)</u> |
| Common Stock | 01/13/2009 | | P | 1,500 A | \$ 21.4971 | 8,000 | I | By: Investment Partnership II <u>(1)</u> |
| Common Stock | 01/13/2009 | | P | 17,000 A | \$ 21.4971 | 88,500 | I | By: Investment Partnership III <u>(1)</u> |

Edgar Filing: ADVANCED MEDICAL OPTICS INC - Form 4

| | | | | | | | | |
|--------------|------------|---|--------|---|------------|---------|---|--|
| Common Stock | 01/14/2009 | P | 13,000 | A | \$ 21.5125 | 226,900 | I | By: Investment Partnership I ⁽¹⁾ |
| Common Stock | 01/14/2009 | P | 1,000 | A | \$ 21.5125 | 9,000 | I | By: Investment Partnership II ⁽¹⁾ |
| Common Stock | 01/14/2009 | P | 6,000 | A | \$ 21.5125 | 94,500 | I | By: Investment Partnership III ⁽¹⁾ |
| Common Stock | 01/15/2009 | P | 14,500 | A | \$ 21.535 | 241,400 | I | By: Investment Partnership I ⁽¹⁾ |
| Common Stock | 01/15/2009 | P | 5,500 | A | \$ 21.535 | 100,000 | I | By: Investment Partnership III ⁽¹⁾ |
| Common Stock | 01/16/2009 | P | 5,300 | A | \$ 21.5468 | 246,700 | I | By: Investment Partnership I ⁽¹⁾ |
| Common Stock | 01/16/2009 | P | 2,000 | A | \$ 21.5468 | 102,000 | I | By: Investment Partnership III ⁽¹⁾ |
| Common Stock | 01/26/2009 | P | 5,000 | A | \$ 21.78 | 10,000 | I | By: Investment Partnership IV ⁽¹⁾ |
| Common Stock | 01/26/2009 | P | 5,000 | A | \$ 21.78 | 25,000 | I | By: Investment Partnership V ⁽¹⁾ |

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)

Edgar Filing: ADVANCED MEDICAL OPTICS INC - Form 4

| 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 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 Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr |
|--|--|--------------------------------------|--|--------------------------------|---|--|---|--|--|
|--|--|--------------------------------------|--|--------------------------------|---|--|---|--|--|

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|--|---------------|-----------|---------|-------|
| | Director | 10% Owner | Officer | Other |
| GAMCO INVESTORS, INC. ET AL ONE CORPORATE CENTER RYE, NY 10580 | | X | | |
| GABELLI MARIO J C/O GAMCO INVESTORS, INC ONE CORPORATE CENTER RYE, NY 10580 | | X | | |
| GGCP, INC. 140 GREENWICH AVENUE GREENWICH, CT 06830 | | X | | |

Signatures

/s/ Peter D. Goldstein, Attorney-In-Fact for MARIO J. GABELLI, GGCP, INC., and GAMCO INVESTORS, INC.

02/03/2009

__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).

The Reporting Persons have less than a 100% interest in this entity. The amount of securities reported as beneficially owned reflects the (1) total amount of securities held by this entity which is greater than the Reporting Persons indirect pecuniary interests. The Reporting Persons hereby disclaim ownership of these securities in excess of their pecuniary interests.

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.