#### Edgar Filing: ALLERGAN INC - Form 4

| ALLERGAN<br>Form 4   |  |  |   |   |   |   |  |  |                          |  |  |  |
|--|--|--|---|---|---|---|--|--|--------------------------|--|--|--|
| August 22, 20  | Л  |  | CECU  |   |   |   |  |  | PPROVAL                  |  |  |  |
| . •  | • UNITED   | STATES                                     |   | RITIES A  |   |   | E COMMISSIO  | N OMB<br>Number:   | 3235-0287                |  |  |  |
| Check this<br>if no long<br>subject to<br>Section 16<br>Form 4 or<br>Form 5<br>obligation<br>may conti<br><i>See</i> Instru<br>1(b). | er <b>STATEN</b><br>5.<br>Filed put<br>s Section 170 |  | F CHAN<br>Section 1<br>Public U   | NGES IN<br>SECUI  | Expires:<br>Estimated<br>burden hou<br>response   | urs per   |  |  |                          |  |  |  |
| (Print or Type R   | esponses)  |  |   |   |   |   |  |  |                          |  |  |  |
| 1. Name and Address of Reporting Person <u>*</u><br>Dunsire Deborah  |  |  | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>ALLERGAN INC [AGN] |   |   |   | 5. Relationship of Reporting Person(s) to Issuer   |  |                          |  |  |  |
| (Last)   | (First) (  | Middle)                                    | 3. Date of Earliest Transaction   |   |   |   | (Che   | (Check all applicable)   |                          |  |  |  |
| 2525 DUPONT DRIVE  |  |  | (Month/Day/Year)<br>08/20/2014  |   |   |   | X_ Director 10% Owner<br>Officer (give title Other (specify<br>below) below)                                       |  |                          |  |  |  |
| IRVINE, CA   | 4. If Amendment, Date Original Filed(Month/Day/Year) |  |   | <ul> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting<br/>Person</li> </ul> |   |   |  |  |                          |  |  |  |
| (City)   | (State)  | (Zip)                                      | Tah   | le I - Non-l  | Derivative  | Securities A  | Acquired, Disposed   | of. or Beneficia   | llv Owned                |  |  |  |
|  | 2. Transaction Date<br>Month/Day/Year)               | 2A. Deemo<br>Execution<br>any<br>(Month/Da | ed<br>Date, if  | 3.<br>Transactio<br>Code<br>(Instr. 8)<br>Code V  | 4. Securit<br>mAcquired<br>Disposed<br>(Instr. 3, | ties<br>(A) or<br>of (D)                                | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I)<br>(Instr. 4) | 7. Nature of<br>Indirect |  |  |  |
| Reminder: Repo   | ort on a separate line                               | e for each cla                             | ass of sec  | urities bene  | Perso<br>inforr<br>requi                          | ons who res<br>nation con<br>red to resp<br>ays a curre | or indirectly.<br>spond to the colle<br>tained in this forn<br>ond unless the fo<br>ntly valid OMB co              | n are not<br>rm  | SEC 1474<br>(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. |

|                           | Derivative<br>Security |            |      |   | (D)          | Disposed of<br>(D)<br>(Instr. 3, 4, |                     |                    |                 |  |        |
|---------------------------|------------------------|------------|------|---|--------------|-------------------------------------|---------------------|--------------------|-----------------|--|--------|
|                           |                        |            | Code | V | (A)          | (D)                                 | Date<br>Exercisable | Expiration<br>Date | Title           | Amount<br>or<br>Number<br>of<br>Shares |        |
| Phantom<br>Stock<br>Units | <u>(1)</u>             | 08/20/2014 | А    |   | 15.33<br>(2) |                                     | (3)                 | (3)                | Common<br>Stock | 15.33                                  | \$ 163 |

### **Reporting Owners**

| Reporting Owner Name / Address                           | Relationships |           |         |       |  |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|--|
| I B  | Director      | 10% Owner | Officer | Other |  |  |  |  |
| Dunsire Deborah<br>2525 DUPONT DRIVE<br>IRVINE, CA 92612 | Х             |           |         |       |  |  |  |  |

### Signatures

/s/ Matthew J. Maletta, Attorney-in-Fact for Deborah Dunsire

\*\*Signature of Reporting Person

08/21/2014 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) Converts to common stock on a 1-for-1 basis.

(2) Phantom stock units acquired under the Allergan, Inc. Deferred Directors' Fee Program.

(3) Phantom stock units are to be settled 100% in common stock upon the Reporting Person's retirement as an Allergan, Inc. director.

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.