EBERT CHARLES D

Form 4

Common

Stock, par

12/01/2005

December 01, 2005

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL	
. 01111	• • UNITED ST		CURITIES AND EXCHANGE C Washington, D.C. 20549				OMMISSION	OMB Number:	3235-0287
Check th if no long subject to Section 1 Form 4 o	s box er STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Expires: January 31, 2005 Estimated average burden hours per response 0.5		
Form 4 or Form 5 obligations may continue. See Instruction 1(b). 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									0.5
(Print or Type Responses)									
1. Name and A EBERT CH	Symbol	2. Issuer Name and Ticker or Trading Symbol WATSON PHARMACEUTICALS				5. Relationship of Reporting Person(s) to Issuer			
			INC [WPI]				(Check all applicable)		
(Last) C/O WATS	(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 12/01/2005				Director 10% OwnerX_ Officer (give title below) below) below)			
PHARMACEUTICALS, INC., 311 BONNIE CIRCLE Sr. VP, Research & Development									ppment
	(Street)	endment, Date Original onth/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			
CORONA,	CA 92880						Person		
(City)	(State) (Zip	Tabi	e I - Non-D			_	uired, Disposed of		
1.Title of Security (Instr. 3)	(Month/Day/Year) E	Fransaction Date 2A. Deemed Execution Date, if any (Month/Day/Year)			ispose 4 and (A)	cquired d of (D) 5)	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
C			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Stock, par value \$0.0033	12/01/2005		S	1,700	D	\$ 33.31	17,102	D	
Common Stock, par value \$0.0033	12/01/2005		S	500	D	\$ 33.3	16,602	D	

S

\$

33.29

9,802

D

6,800 D

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value \$0.0033

Common

Stock, par value 12/01/2005 S 8,000 D \$ 1,802 (1) D

\$0.0033

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

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9. Nu

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(Insti

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

1. Title of 3. Transaction Date 3A. Deemed 8. Price of 4. 5. 6. Date Exercisable and 7. Title and Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber **Expiration Date** Amount of Derivative or Exercise Code (Month/Day/Year) Underlying Security Security of (Instr. 3) Price of (Instr. 8) Securities (Instr. 5) (Month/Day/Year) Derivative Derivative Securities (Instr. 3 and 4) Security Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) Amount or Expiration Title Number Exercisable Date of

Code V (A) (D)

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

EBERT CHARLES D C/O WATSON PHARMACEUTICALS, INC. 311 BONNIE CIRCLE CORONA, CA 92880

Sr. VP, Research & Development

Shares

Signatures

/s/CHARLES D.

EBERT 12/01/2005

**Signature of Reporting Date
Person

Reporting Owners 2

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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).
- Includes 472 shares acquired through the Watson Pharmaceuticals, Inc. Employee Stock Purchase Plan and 1,330 shares of restricted
- (1) stock issued pursuant to the provisions of the Amendment and Restatement of the 2001 Incentive Award Plan of Watson Pharmaceuticals, Inc.

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.