Edgar Filing: ENDO PHARMACEUTICALS HOLDINGS INC - Form 4

ENDO PHARMA Form 4 March 15, 2005	ACEUTICA	LS HOLI	DINGS I	NC						
FORM 4									APPROVAL	
	UNITED	STATES		RITIES An ashington			COMMISSIO	N OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEM	STATEMENT OF CHANGES IN BENEFICIAL O SECURITIES						Estimated burden ho response.	red average hours per	
obligations may continue. See Instruction 1(b).	Section 17((a) of the	Public U	Jtility Hol	ding Cor		nge Act of 1934 of 1935 or Secti 940			
(Print or Type Respo	onses)									
1. Name and Address of Reporting Person <u>*</u> CLINGEN BRIAN T			2. Issuer Name and Ticker or Trading Symbol			C	5. Relationship of Reporting Person(s) to Issuer			
			ENDO PHARMACEUTICALS HOLDINGS INC [ENDP]				(Check all applicable)			
(Last)	(First) (Middle)	3. Date of Earliest Transaction (Month/Day/Year)				X_ Director 10% Owner Officer (give title Other (specify			
5101 DARMSTA A	ADT ROAD	, SUITE	03/11/2	-			below)	below)		
HILLSIDE, IL 6	(Street) 50162			endment, D onth/Day/Yea	-	ıl	6. Individual or Applicable Line) _X_ Form filed by Form filed by Person		Person	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	ally Owned	
	ansaction Date hth/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	4. Securit nAcquired Disposed (Instr. 3, 4	(A) or of (D) 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A)or(D) Price	Transaction(s) (Instr. 3 and 4)			
Reminder: Report or	n a senarate line	e for each cl	ass of sec				or indirectly			
	1				Perso inform requir	ns who res nation cont red to respo ays a curre	spond to the colle ained in this forr ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)	
	Tab					posed of, or convertible s	Beneficially Owne securities)	d		
1. Title of 2.	3. Trar	saction Dat	e 3A. De	eemed	4.	5. Numbe	r of 6. Date Exer	cisable and	7. Title and Am	

1. Title of
Derivative2.3. Transaction Date
(Month/Day/Year)3A. Deemed4.5. Number of
TransactionDerivative6. Date Exercisable and
Expiration Date7. Title and Amount of
Underlying Securities

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8	3) A c ((Securities Acquired or Dispos (D) (Instr. 3, and 5)	(A) sed of	(Month/Day	/Year)	(Instr. 3 and	4)
				Code Y	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
2004 Stock Incentive Plan	\$ 22.06	03/11/2005		А		10,000		<u>(1)</u>	03/11/2015	Common Stock	10,000

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
CLINGEN BRIAN T 5101 DARMSTADT ROAD SUITE A HILLSIDE, IL 60162	X							
Signatures								
/s/ Brian T.	3/15/2005							

Clingen

<u>**</u> Signature of	Date
Reporting Person	

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) Exercisable 25% per year on March 11, 2006, March 11, 2007, March 11, 2008, and March 11, 2009.
- These stock options were granted to Mr. Clingen in consideration of his services on the Endo Pharmaceuticals Holdings Inc. Board of (2)Directors.

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.