### Edgar Filing: Jones Trevor M - Form 4

Form 4											
July 30, 2008								OMB A	PPROVA	L	
FORM 4	UNITED	STATES		RITIES A shington			E COMMISSIO	N OMB Number:	3235-(	0287	
Check this box if no longer		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								y 31, 2005	
subject to Section 16. Form 4 or	IENT OF	CHAN	IGES IN SECUF	Estimated burden hou response	average urs per	0.5					
abligations	Form 5 obligations may continue.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 Respon	ses)										
1. Name and Address of Reporting Person <u></u> Jones Trevor M			Symbol	r Name <b>and</b>		-	5. Relationship of Reporting Person(s) to Issuer				
			ALLERGAN INC [(AGN)] 3. Date of Earliest Transaction				(Check all applicable)				
(Last) (First) (Middle) 2525 DUPONT DRIVE			(Month/Day/Year) 07/28/2008			X_ Director 10% Owner Officer (give title Other (specify below) below)					
(Street)			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					
IRVINE, CA 926	12							More than One R			
(City) (S	State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	l	
	nsaction Date h/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or 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 Indirect Beneficia Ownershi (Instr. 4)	1	
Reminder: Report on a	a separate line	for each cla	ass of sect	urities benef	Perso inforn requir	ns who res nation con red to resp lys a curre	or indirectly. spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (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.

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	Derivative Security				<ul><li>(A) or</li><li>Dispose</li><li>(D)</li><li>(Instr. 3)</li><li>and 5)</li></ul>						
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	<u>(1)</u>	07/28/2008	А		11.56 (2)		(3)	(3)	Common Stock	0	\$ 51
Phantom Stock Units	<u>(1)</u>	07/28/2008	А		11.56 (2)		(3)	(3)	Common Stock	0	\$ 51
Phantom Stock Units	<u>(1)</u>	07/29/2008	А		22.6 (2)		(3)	(3)	Common Stock	0	\$ 53

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
Reporting O wher Funite / Funitess	Director	10% Owner	Officer	Other			
Jones Trevor M 2525 DUPONT DRIVE IRVINE, CA 92612	Х						
Signatures							
By: Matthew J. Maletta, Attorney-in-Fact		07/30	/2008				
**Signature of Reporting Person		Da	te				

## **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 in lieu of cash for meeting fees.

(3) Phantom stock units are to be settled 100% in 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.