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WATSON PHARMACEUTICALS INC

Form 4

September 05, 2006

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

OMB Number:

Expires:

3235-0287 January 31,

0.5

Check this box if no longer

subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

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response...

Form 5 obligations

may continue. See Instruction

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

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person *

MUNRO GORDON

2. Issuer Name and Ticker or Trading

Symbol

WATSON PHARMACEUTICALS

Issuer

5. Relationship of Reporting Person(s) to

INC [WPI]

3. Date of Earliest Transaction

(Month/Day/Year) 09/01/2006

Director 10% Owner

(Check all applicable)

Sr. VP, Quality Assurance

Other (specify X_ Officer (give title below)

C/O WATSON PHARMACEUTICALS, INC., 311

(First)

BONNIE CIRCLE

(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 Form filed by More than One Reporting

CORONA, CA 92880

(City) (State)

(Zip)

(Middle)

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

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if (Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

Amount

5. Amount of Securities Beneficially Owned Following

Reported

7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Ownership (Instr. 4) Indirect (I)

(Instr. 4)

Transaction(s) (Instr. 3 and 4) (D) Price

Common

Stock (Restricted)

(1)

09/01/2006

1,500 \$0 2,940 Α A

(A)

D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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1

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

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. Transactic Code (Instr. 8)	5. Number proof 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options to Purchase Common Stock (2)	\$ 25.64	09/01/2006		A	4,500	(3)	09/01/2016	Common Stock, par value \$0.0033	

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

MUNRO GORDON C/O WATSON PHARMACEUTICALS, INC. 311 BONNIE CIRCLE CORONA, CA 92880

Sr. VP, Quality Assurance

Signatures

/s/GORDON

MUNRO 09/01/2006

**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).
- These restricted shares of common stock, par value \$0.0033, were issued pursuant to the provisions of the Amendment and Restatement of the 2001 Incentive Award Plan of Watson Pharmaceuticals, Inc. (including, but not limited to, restrictions on transferability and certain forfeiture provisions concerning unvested restricted shares). The restricted shares vest (i) fifty percent on the second anniversary of the date of grant, and (ii) fifty percent on the fourth anniversary of the date of grant.
- (2) The options are to be incentive stock options to the extent permitted by law, and thereafter to be non-statutory stock options.
- (3) These stock options shall become exercisable in four equal annual installments commencing on September 1, 2007.

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.

Reporting Owners 2