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EBERT CH	ARLES D										
Form 4	5 2005										
November 1									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB Number:	3235-0287		
Check this box Washington, D.C. 20549										January 31,	
if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section 16				SECUR	RITIES				Expires: Estimated a burden hour response	rs per	
obligatio may com <i>See</i> Instr 1(b).	tinue. Section 17(a			ility Hold vestment	•	· ·		1935 or Sectior	1		
(Print or Type l	Responses)										
1. Name and Address of Reporting Person <u>*</u> EBERT CHARLES D			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
		WATSON PHARMACEUTICALS INC [WPI]					(Check all applicable)				
(Last)	(Last) (First) (Middle) 3. Date of (Month/D			f Earliest Transaction Day/Year)				Director10% Owner X_Officer (give titleOther (specify below) below)			
C/O WATS PHARMAC BONNIE C	CEUTICALS, INC		1/14/20	005				/	earch & Develo	opment	
	(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			
CORONA,	CA 92880							Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-D	Derivative S	Securi	ties Acqu	iired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Stock, par value \$0.0033	11/14/2005			М	12,000	А	\$ 26.4	13,802	D		
Common Stock, par value \$0.0033	11/14/2005			М	3,000	A	\$ 26.14	16,802 <u>(1)</u>	D		

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

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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.

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 of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Underlying Secur (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Am or Nu of S
Non-Qualified Options to Purchase Common Stock	\$ 26.4	11/14/2005		М	12,000	05/28/2005	05/28/2012	Common Stock, par value \$0.0033	12
Non-Qualified Options to Purchase Common Stock	\$ 26.14	11/14/2005		М	3,000	08/09/2005	08/09/2014	Common Stock, par value \$0.0033	3,

Reporting Owners

Reporting Owner Name / Address		Relationships					
L B		Director	10% Owner	Officer	Other		
EBERT CHARLES D C/O WATSON PHARMACEUTICALS, INC. 311 BONNIE CIRCLE CORONA, CA 92880				Sr. VP, Research & Development			
Signatures							
/s/CHARLES D. EBERT	11/15/2005						
<u>**</u> Signature of Reporting Person	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).
- 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.