PFIZER INC Form 3 August 24, 2006

## FORM 3

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

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person \* Statement PFIZER INC [PFE] WAXMAN ALLEN P (Month/Day/Year) 08/15/2006 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) PFIZER INC. ATT: (Check all applicable) **CORPORATE** SECRETARY. 235 EAST 10% Owner Director **42ND STREET** \_X\_\_ Officer Other (give title below) (specify below) (Street) 6. Individual or Joint/Group Senior Vice President Filing(Check Applicable Line) \_X\_ Form filed by One Reporting NEW YORK, NYÂ 10017 Person Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities 4. Nature of Indirect Beneficial 1. Title of Security Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 4) (Instr. 5) Form: Direct (D) or Indirect (Instr. 5) Â Common Stock D 45,038 Common Stock 1,206 I By Rule 16b-3 Plan Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) 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

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

currently valid OMB control number.

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1. Title of Derivative Security (Instr. 4)	2. Date Exerci Expiration Da (Month/Day/Year)		3. Title and A Securities Un Derivative Se (Instr. 4)	nderlying	4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	
Employee Stock Option (right to buy)	01/02/2006	12/31/2012	Common Stock	35,000	\$ 31.11	D	Â
Employee Stock Option (right to buy)	(1)	02/25/2014	Common Stock	55,000	\$ 37.15	D	Â
Employee Stock Option (right to buy)	(2)	02/23/2015	Common Stock	45,000	\$ 26.2	D	Â
Employee Stock Option (right to buy)	02/23/2009	02/22/2016	Common Stock	90,000	\$ 26.2	D	Â
Phantom Stock Units SSP	(3)	(3)	Common Stock	2,899	\$ <u>(4)</u>	D	Â

## **Reporting Owners**

Reporting Owner Name / Address	Relationships				
1 0	Director	10% Owner	Officer	Other	
WAXMAN ALLEN P PFIZER INC. ATT: CORPORATE SECRETARY 235 EAST 42ND STREET NEW YORK Â NYÂ 10017	Â	Â	Senior Vice President	Â	

## **Signatures**

By: Lawrence A. Fox, by power of atty. 08/24/2006

\*\*Signature of Reporting Person Date

### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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) This option becomes exercisable in 3 equal annual installments beginning on February 26, 2007.
- (2) This option becomes exercisable in 3 equal annual installments beginning on February 24, 2008.
- These units, which were acquired pursuant to the Pfizer Inc. Nonfunded Deferred Compensation and Supplemental Savings Plan, are (3) settled in cash following the reporting person's separation from service and, subject to certain conditions, may be transferred by the reporting person into an alternative investment account at any time.
- (4) Each unit represents one phantom share of common stock.

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.

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