

Dunsire Deborah  
 Form 4  
 September 29, 2010

**FORM 4**

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN 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 Person \*  
 Dunsire Deborah

2. Issuer Name and Ticker or Trading Symbol  
 ALLERGAN INC [AGN]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
 2525 DUPONT DRIVE  
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)  
 09/27/2010

Director  10% Owner  
 Officer (give title below)  Other (specify below)

IRVINE, CA 92612  
 (City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 of Ownership (Instr. 4)		
				(A) or (D)	Code	V	Amount	(D)	Price

Reminder: Report on a separate line for each class of securities beneficially 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 currently valid OMB control number.**

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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Underlying Securities (Instr. 3 and 4)
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Derivative Security			(A) or Disposed of (D) (Instr. 3, 4, and 5)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
			Code	V						
Phantom Stock Units	(1)	09/07/2010	A	V	3.38 (2)	(3)	(3)	Common Stock	3.38	\$ 63
Phantom Stock Units	(1)	09/27/2010	A		15.11 (4)	(3)	(3)	Common Stock	15.11	\$ 66
Phantom Stock Units	(1)	09/27/2010	A		15.11 (4)	(3)	(3)	Common Stock	15.11	\$ 66
Phantom Stock Units	(1)	09/28/2010	A		29.94 (4)	(3)	(3)	Common Stock	29.94	\$ 6

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Dunsire Deborah 2525 DUPONT DRIVE IRVINE, CA 92612		X		

## Signatures

/s/ Matthew J. Maletta, Attorney-in-Fact for Deborah Dunsire  
 Dunsire  
 \*\*Signature of Reporting Person  
 09/29/2010  
 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).
- (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 quarterly dividend, exempt transaction under Rule 16a-11.
- (3) Phantom stock units are to be settled 100% in stock upon the reporting person's retirement as an Allergan, Inc. director.
- (4) Phantom stock units acquired under the Allergan, Inc. Deferred Directors' Fee Program in lieu of cash for meeting fees.

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.