Edgar Filing: ADVANCED MEDICAL OPTICS INC - Form 4

ADVANCEE Form 4 May 25, 2006	D MEDICAL OPTIC	CS INC								
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL 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 OMB MB 3235-0287 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 16(b). State Approximation of the Securities Exchange Act of 1934, section 17(a) of the Investment Company Act of 1940 0.5										
(Print or Type R 1. Name and Ac ARONSON	ddress of Reporting Pers	Symbol ADVAN	2. Issuer Name and Ticker or Trading Symbol ADVANCED MEDICAL OPTICS INC [EYE]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Month 1700 E. ST. ANDREW PLACE (Street) 4. If An			Date of Earliest Transaction onth/Day/Year) /24/2006 f Amendment, Date Original ed(Month/Day/Year)				 Director X_Officer (give title Other (specify below) VP, Investor Rel & Corp. Comm. 6. Individual or Joint/Group Filing(Check Applicable Line) 			
SANTA AN	A, CA 92705 (State) (Zip	⁾⁾ Table	I - Non-De	erivative S	Securi	ties Aco	_X_ Form filed by M Form filed by M Person quired, Disposed o	More than One Re	eporting	
1.Title of Security (Instr. 3)	, j í	2A. Deemed Execution Date, if ny Month/Day/Year)	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	l (A) o l 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 of Indirect Beneficial Ownership (Instr. 4)	
Stock	05/24/2006		А	1,000	А	\$0 (<u>1</u>)	1,916.4616 <u>(2)</u>	D		

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.

 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. Transacti Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	ve Expiration Date (Month/Day/Year) f		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 C S (1
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (Right to Buy)	\$ 45.26	05/24/2006		A	9,600	<u>(3)</u>	05/24/2016	Common Stock	9,600	

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
ARONSON SHEREE L 1700 E. ST. ANDREW PLACE SANTA ANA, CA 92705			VP, Investor Rel & Corp. Comm.			
Signatures						

Sheree L. 05/25/2006 Aronson **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).
- Exempt grant of Restricted Stock under the Issuer's 2005 Incentive Compensation Plan, which will vest as to 100% of the shares on May (1)24, 2009, the third anniversary of the date of issuance, provided that certain conditions are met.
- Includes an aggregate of 916.4616 shares acquired under the Advanced Medical Optics, Inc. Employee Stock Purchase Plan through the (2)purchase period that ended on April 28, 2006.
- Stock option grant exempt pursuant to Rule 16b-3, which vests ratably on each of the first four anniversaries of the date of grant, such (3) that the option will be fully vested on May 24, 2010 (provided applicable provisions of such option are complied with).

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.