#### Edgar Filing: ENDO PHARMACEUTICALS HOLDINGS INC - Form 4

ENDO PHARMACEUTICALS HOLDINGS INC Form 4 August 15, 2007 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading LEE DAVID A H Issuer Symbol ENDO PHARMACEUTICALS (Check all applicable) HOLDINGS INC [ENDP] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner Other (specify X\_Officer (give title (Month/Day/Year) below) below) **100 ENDO BOULEVARD** 08/14/2007 Exec. V.P and CSO (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting CHADDS FORD, PA 19317 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction(A) or Disposed of (D) Securities Form: Direct Indirect (Instr. 3) any Code (Instr. 3, 4 and 5) Beneficially (D) or Beneficial Owned Indirect (I) Ownership (Month/Day/Year) (Instr. 8) Following (Instr. 4) (Instr. 4) Reported (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price Lee 2006 Grantor Common Retained Stock, par Annuity 185,754 (2) 08/14/2007 Ζ 109.305 D (1)I value \$.01 Trust, Dr. David A. per share Lee Trustee Common Stock, par 08/14/2007 Ζ 185,754 (2) D 109.305 A <u>(1)</u> value \$.01 per share

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

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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)	4. Transact Code (Instr. 8)			ate	7. Titl Amou Under Secur (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
L O	Director	10% Owner	Officer	Other		
LEE DAVID A H 100 ENDO BOULEVARD			Exec. V.P and			
CHADDS FORD, PA 19317			CSO			

## **Signatures**

/s/ David A.H. Lee	08/15/2007			
**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).

On August 11, 2006, in connection with his financial planning, Dr. David Lee transferred 185,754 shares of Endo common stock that he
(1) had owned directly to the Lee 2006 Grantor Retained Annuity Trust, Dr. David A. Lee Trustee. The acquisition of shares by Dr. Lee reported in this Form 4 is a result of a scheduled withdrawal of shares from that trust in accordance with the trust documents.

Dr. Lee's beneficial ownership includes 76,449 shares of common stock held in the Lee 2006 Grantor Retained Annuity Trust, Dr. David(2) A. Lee Trustee, for which Dr. Lee serves as trustee and as to which shares Dr. Lee holds either the sole or the shared power of disposition and power to vote.

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**