

PRYGOCKI MARK A SR
Form 4
May 19, 2009

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 *
PRYGOCKI MARK A SR

2. Issuer Name and Ticker or Trading Symbol
MEDICIS PHARMACEUTICAL CORP [MRX]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
7720 N. DOBSON RD.
(Street)

3. Date of Earliest Transaction (Month/Day/Year)
05/15/2009

____ Director
____ Officer (give title below) _____ 10% Owner
____ Other (specify below) EVP,COO

SCOTTSDALE, AZ 85256

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
___ Form filed by More than One Reporting Person

(City) (State) (Zip)

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 Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount (A) or (D) Price		
Common Stock	05/15/2009		M		8,047 (1) \$ 11	D	
Common Stock	05/15/2009		M		4,906 (2) \$ 11	D	
Common Stock	05/15/2009		S		8,047 \$ 15	D	
Common Stock	05/15/2009		S		674 \$ 15.02	D	
Common Stock	05/15/2009		S		332 \$ 15.03	D	

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Common Stock	05/15/2009	S	500	D	\$ 15.04	235,020	D
Common Stock	05/15/2009	S	100	D	\$ 15.0405	234,920	D
Common Stock	05/15/2009	S	100	D	\$ 15.0412	234,820	D
Common Stock	05/15/2009	S	400	D	\$ 15.05	234,420	D
Common Stock	05/15/2009	S	100	D	\$ 15.0505	234,320	D
Common Stock	05/15/2009	S	600	D	\$ 15.06	233,720	D
Common Stock	05/15/2009	S	100	D	\$ 15.065	233,620	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.

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(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 Derivative Security	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 (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Amount or Number of Shares	
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	
Employee Stock Option	\$ 11	05/15/2009		M	8,047	07/29/2004	07/29/2009	Common Stock	8,047
Employee Stock Option	\$ 11	05/15/2009		M	4,906	07/29/2004	07/29/2009	Common Stock	4,906

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
PRYGOCKI MARK A SR 7720 N. DOBSON RD. SCOTTSDALE, AZ 85256			EVP,COO	

Signatures

Mark Prygocki,Sr.	05/18/2009
<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).
- (1) Exercised stock options were scheduled to expire on July 29, 2009.
- (2) Exercised stock options were scheduled to expire on July 29, 2009.

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.