Edgar Filing: ADVANCED MEDICAL OPTICS INC - Form 4

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ADVANCE Form 4 June 02, 200	D MEDICAL (8	OPTICS IN	IC .								
FORM	14									PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANG Washington, D.C. 20549						GE (COMMISSION	OMB Number:	3235-0287		
Check this box if no longer						Expires:	January 31, 2005				
subject to Section 1 Form 4 o	statement of changes in Beneficial Ownership of on 16. SECURITIES						Estimated a burden hou response	average Irs per			
Form 5 obligations may continue. See Instruction 1(b). 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 I	Responses)										
1. Name and Address of Reporting Person <u>*</u> MEIER RICHARD A			2. Issuer Name and Ticker or Trading Symbol ADVANCED MEDICAL OPTICS				CS	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			INC [EY	(E]							
(Last) (First) (Middle) C/O ADVANCED MEDICAL			3. Date of Earliest Transaction (Month/Day/Year) 05/29/2008					Director 10% Owner X Officer (give title Other (specify below) below) President and COO			
OPTICS, INC., 1700 E. ST. ANDREW PLACE											
	(Street)		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 			
	NA, CA 92705							Person	lore than One Ke	eporting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securitie	es Ac	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Execution any	emed on Date, if /Day/Year)	Transactio Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, -	(A) or of (D) 4 and 5) (A) or		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)	
Common Stock				Coue v	Amount	(D) P	nce	73,484.0655 (1)	D		
Common Stock								5.4412	I	By 401(k) Trust (as of 5/30/08)	

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

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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. Transactio Code (Instr. 8)	onDerivative Securities Acquired (A) Disposed of	Securities (Month/Day Acquired (A) or Disposed of (D) (Instr. 3, 4, and		ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Employee Stock Option (Right to Buy)	\$ 22.94	05/29/2008		A	109,000		(2)	05/29/2018	Common Stock	109,00

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
MEIER RICHARD A C/O ADVANCED MEDICAL OPTICS, INC. 1700 E. ST. ANDREW PLACE SANTA ANA, CA 92705			President and	d COO			
Signatures							
Richard A. Meier, By: Aimee S. Weisner, Attor in Fact	05/30/2008						
<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) Includes an aggregate of 6,484.0655 shares acquired under the Advanced Medical Optics, Inc. Employee Stock Purchase Plan ("ESPP") through the purchase period which ended on April 30, 2008.

This Rule 16b-3 exempt stock option, granted under the Issuer's 2004 Stock Incentive Plan, will vest rataly on each of the first four (2) anniversaries of the date of grant, such that the option will be fully vested on May 29, 2012 (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.