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MCCLUSK Form 4 May 02, 200	I STEPHEN C									
FORM	ЛЛ								PPROVAL	
	UNITED	STATES		RITIES A			COMMISSIO	N OMB Number:	.: 3235-0287	
Check th if no lon, subject to Section 1 Form 4 of Form 5 obligation may con See Instr 1(b).	rsuant to S (a) of the I	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940					Estimated burden hou response	Estimated average burden hours per response 0.5		
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> MCCLUSKI STEPHEN C			2. Issuer Name and Ticker or Trading Symbol INDEVUS PHARMACEUTICALS INC [IDEV]			5. Relationship of Reporting Person(s) to IssuerS (Check all applicable)				
(Last) (First) (Middle) INDEVUS PHARMACEUTICALS, INC., 33 HAYDEN AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 04/30/2007			X_ Director 10% Owner Officer (give title Other (specify below) below)				
(Street) LEXINGTON, MA 02421			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)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or 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)	
Reminder: Rep	oort on a separate lin	e for each cla	ass of sec	urities bene	Perso inform requir	ns who res nation cont ed to resp lys a curre	or indirectly. spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tah	le II - Deriv	vative Sec	curities Aco	uired. Dis	posed of. or	Beneficially Owner	d		

(*e.g.*, puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction of Derivative	Expiration Date	Underlying Securities	Deriva

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		Securi (Instr.
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Stock Unit ⁽¹⁾	\$ 0	04/30/2007		А	8,000		<u>(1)</u>	<u>(1)</u>	Common Stock	8,000	\$ (

Reporting Owners

Reporting Owner Name / A	Relationships						
	Director	10% Owner	Officer	Other			
MCCLUSKI STEPHEN C INDEVUS PHARMACEUTIO 33 HAYDEN AVENUE LEXINGTON, MA 02421	CALS, INC.	X					
Signatures							
STEPHEN C MCCLUSKI	05/02/2007	,					
<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).

Grant of 8,000 deferred stock units (DSUs) under the Company's 2004 Equity Incentive Plan. Each DSU represents a right to receive one share of Indevus common stock. The grant vests in three equal annual increments on April 30, 2008, 2009 and 2010. Upon the earlier of

(1) shale of indevis common stock. The grant vests in three equal annual increments on April 50, 2009, 2009 and 2010. Open the earlier of the recipient's retirement from the Board of Directors of the Company or five (5) years from the date of grant, any DSUs that are vested and have not terminated are converted into common stock and distributed to the recipient, unless further deferred by the recipient.

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.