

MEDICIS PHARMACEUTICAL CORP  
 Form 3  
 April 07, 2008

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF 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 * |         | 2. Date of Event Requiring Statement | 3. Issuer Name <b>and</b> Ticker or Trading Symbol                   |  |
| Â IPPOLITO VINCENT P                      |         | (Month/Day/Year)                     | MEDICIS PHARMACEUTICAL CORP [MRX]                                    |  |
| (Last)                                    | (First) | (Middle)                             | 04/04/2008   |  |
| 8125 N. HAYDEN ROAD                       |         |                                      | 4. Relationship of Reporting Person(s) to Issuer                     | 5. If Amendment, Date Original Filed(Month/Day/Year)                   |
| (Street)                                  |         |                                      | (Check all applicable)   |  |
| SCOTTSDALE,Â AZÂ 85258                    |         |                                      | <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner | 6. Individual or Joint/Group Filing(Check Applicable Line)             |
| (City)                                    | (State) | (Zip)                                | <input type="checkbox"/> Officer <input type="checkbox"/> Other      | <input checked="" type="checkbox"/> Form filed by One Reporting Person |
|   |         |                                      | (give title below) (specify below)                                   | <input type="checkbox"/> Form filed by More than One Reporting Person  |
|   |         |                                      | EVP, Sales & Marketing   |  |

**Table I - Non-Derivative Securities Beneficially Owned**

| 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---------------------------------|---|--|---|
| Common Stock                    | 22,702 <sup>(1)</sup>                                 | D  | Â   |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

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

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security: Direct (D) or Indirect | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--|--|---|--|--|---|
|  | Date Exercisable   | Expiration Date   | Title  | Amount or Number of  |   |

|                                  |            |            |              | Shares |          | (I)<br>(Instr. 5) |   |
|----------------------------------|------------|------------|--------------|--------|----------|-------------------|---|
| <u>(2)</u> Employee Stock Option | 07/31/2004 | 07/31/2013 | Common Stock | 40,000 | \$ 29.2  | D                 | Â |
| <u>(3)</u> Employee Stock Option | 01/08/2004 | 01/08/2013 | Common Stock | 45,000 | \$ 25.1  | D                 | Â |
| <u>(4)</u> Employee Stock Option | 07/16/2005 | 07/16/2014 | Common Stock | 36,000 | \$ 38.45 | D                 | Â |
| <u>(5)</u> Employee Stock Option | 07/21/2006 | 07/21/2015 | Common Stock | 15,000 | \$ 32.41 | D                 | Â |

## Reporting Owners

| Reporting Owner Name / Address                                    | Relationships |           |                          |       |
|---|---------------|-----------|--------------------------|-------|
|   | Director      | 10% Owner | Officer                  | Other |
| IPPOLITO VINCENT P<br>8125 N. HAYDEN ROAD<br>SCOTTSDALE, AZ 85258 | Â             | Â         | Â EVP, Sales & Marketing | Â     |

## Signatures

Vincent P.  
Ippolito

04/04/2008

\*\*Signature of Reporting Person                      Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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 2,400 shares from Restricted Stock grant dated 7/21/05 - remaining vesting of 600 shares on 7/21/08, 900 shares on 7/21/09 and 900 shares on 7/21/10. Includes 2,160 shares from Restricted Stock grant dated 2/07/06 - remaining vesting of 540 shares on 2/07/09, 810 shares on 2/07/10 and 810 shares on 2/07/11. Includes 4,379 shares from Restricted Stock grant dated 3/07/07 - remaining vesting of 486 shares on 3/07/09, 973 shares on 3/07/10, 1,460 shares on 3/07/11 and 1,460 shares on 3/07/12. Includes 12,755 shares from Restricted Stock grant dated 3/05/08 - vesting over 5 years beginning on grant date - 10% year 1, 10% year 2, 20% year 3, 30% year 4 and 30% year 5.
  - (2) NQ Employee Stock Option grant dated 7/31/03. Vesting over 5 years beginning 7/31/04. 10% year 1, 10% year 2, 20% year 3, 30% year 4, 30% year 5.
  - (3) NQ Employee Stock Option grant dated 1/08/03. Fully vested.
  - (4) NQ Employee Stock Option grant dated 7/16/04. Vesting over 5 years beginning 7/16/05. 10% year 1, 10% year 2, 20% year 3, 30% year 4, 30% year 5.
  - (5) NQ Employee Stock Option grant dated 7/21/05. Vesting over 5 years beginning 7/21/06. 10% year 1, 10% year 2, 20% year 3, 30% year 4, 30% year 5.

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.