FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

						( )			, ,								
1. Name and Address of Reporting Person* <u>Lapointe Gregg Anthony</u>					2. Issuer Name and Ticker or Trading Symbol QUESTCOR PHARMACEUTICALS INC [ QCOR ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
												X Directo	or	r 10% Owne		ner	
(Last) (First) (Middle) 3260 WHIPPLE ROAD					3. Date of Earliest Transaction (Month/Day/Year) 10/09/2009						$\dashv$	Officer (give title Other (s below) below)				pecify	
				— T	4. If Amendment, Date of Original Filed (Month/Day/Year)						6.	6. Individual or Joint/Group Filing (Check Applicable					
(Street) UNION CITY CA 94587										Lin	ine) X Form filed by One Reporting Person						
(City)	(S	tate)	(Zip)									Form f Persor		re thar	one Report	ting	
		Tab	le I - Non-D	erivati	ve Se	curities	s Ac	quired, D	isposed	of, or Be	neficia	lly Owned					
Date			Transacti te onth/Day	Execution Date,		Code (Instr. 5)		ed (A) or tr. 3, 4 and	Beneficia Owned F	es Fo ally (D Following (I)		: Direct c r Indirect E str. 4) C	7. Nature of Indirect Beneficial Ownership				
						Code V	Amount	(A) oi (D)	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)			
		-	Fable II - De (e.ç					uired, Dis s, options				/ Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date if any (Month/Day/Yea	Code	saction e (Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	e V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
STOCK OPTION (Right to Buy) <sup>(1)</sup>	\$5.58	10/09/2009		A		25,000		(2)	10/08/2019	Common Stock	25,000	\$0	25,000	0	D		
STOCK OPTION (Right to Buy) <sup>(1)</sup>	\$5.58	10/09/2009		A		5,000		(3)	10/08/2019	Common Stock	5,000	\$0	5,000	)	D		

## **Explanation of Responses:**

- 1. Options were granted under the Questcor Pharmaceuticals, Inc. 2004 Non-Employee Director's Equity Incentive Plan.
- 2. Options vest monthly over 48 months from the date of the grant.
- 3. Options are 100% immediately vested as of the date of grant.

/s/ Janet Stephens under power of attorney for Gregg A.

10/09/2009

**Lapointe** 

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.