Instruction 1(b).

## FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

Washington,	$D \subset$	205/19
wasiiiiyuii,	D.C.	20049

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL
OWNEDSHID

OMB APPROVAL						
OMB Number: 3235-0362						
Estimated average burden						
hours per response:	1.0					

Form 3	3 Holdings Rep	orted.														
_	4 Transactions		Fi	led pursuant t or Section				Securities Exent Compan			.934					
1. Name and Address of Reporting Person*  STOLL ROGER G PHD					2. Issuer Name and Ticker or Trading Symbol QUESTCOR PHARMACEUTICALS INC [ OSC ]					<u>C</u> [   (Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last) (First) (Middle) 3260 WHIPPLE ROAD					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2003						r)	Officer below)	(give title	е	Other below	(specify )
(Street) UNION	CITY C.	A	94587	4. If Ame	4. If Amendment, Date of Original Filed (Mo				nth/Da	ay/Year)	Line	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)	(S		(Zip)	tive Co		- 0-		Dianas		f av Da		l O				
		lab	le I - Non-Deri	vative Sec	curitie	s Ac	cquirea,	, Dispos	ea o	of, or Be	neficial	ly Owned	l			
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code 8)	action   Of				isposed	5. Amount Securities Beneficial	S Owners Illy Form: D				
				(monangayrrear)		Aı	mount		A) or D) Pri	ce	Issuer's Fi Year (Instr 4)	Fiscal Indire		ect (I) (Instr. 4)		
		7	able II - Deriva (e.g.,	ative Secu puts, calls								Owned				
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. Num of Derivat Securit Acquir (A) or Dispos of (D) ( 3, 4 and	Expiration Da (Month/Day/Y ities red sed (Instr.		6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Amount of Securities Underlying Derivative (Instr. 3 an		f g Security	8. Price of Derivative Security (Instr. 5)			10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)	
					(A)	(D)	Date Exercisal	Expira	ation	Title	Amount or Number of Shares					
Stock Option (Right to Buy) <sup>(1)</sup>	\$0.84	01/01/2003		A	10,000		(2)	12/31/.	2012	Common Stock	10,000	\$0	150,4	407	D	
Stock Option (Right to	\$1.19	01/24/2003		A	7,500		(4)	01/23/	/2013	Common Stock	7,500	\$0	150,4	407	D	

## **Explanation of Responses:**

- 1. Options granted under the Questcor Pharmaceuticals 1993 Non-Employee Director Equity Incentive Plan.
- 2. Options vest monthly over 48 months from the date of grant.
- 3. Options granted under the Questcor Pharmaceuticals, Inc. 1992 Employee Stock Option Plan.
- 4. Options vest 100% at time of grant.

/s/ Roger G. Stoll

02/13/2004

\*\* Signature of Reporting Person

Date

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

- \* 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.