

ACORDA THERAPEUTICS INC
Form 4
June 06, 2008

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
Expires: January 31, 2005
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).

STATEMENT OF CHANGES IN 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 *
LAWRENCE DAVID

2. Issuer Name and Ticker or Trading Symbol
ACORDA THERAPEUTICS INC
[ACOR]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
15 SKYLINE DRIVE
(Street)

3. Date of Earliest Transaction (Month/Day/Year)
06/04/2008

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
Chief Financial Officer

HAWTHORNE, NY 10532

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
____ Form filed by More than One Reporting Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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)
				(A) or (D)	Price		
Common Stock	06/04/2008		S	300	D \$ 29.755	24,100	D
Common Stock	06/04/2008		S	600	D \$ 29.76	23,500	D
Common Stock	06/04/2008		S	500	D \$ 29.77	23,000	D
Common Stock	06/04/2008		S	100	D \$ 29.775	22,900	D
Common Stock	06/04/2008		S	500	D \$ 29.78	22,400	D

Edgar Filing: ACORDA THERAPEUTICS INC - Form 4

Common Stock	06/04/2008	S	1,200	D	\$ 29.79	21,200	D
Common Stock	06/04/2008	S	1,500	D	\$ 29.8	19,700	D
Common Stock	06/04/2008	S	900	D	\$ 29.81	18,800	D
Common Stock	06/04/2008	S	1,400	D	\$ 29.82	17,400	D
Common Stock	06/04/2008	S	200	D	\$ 29.83	17,200	D
Common Stock	06/04/2008	S	200	D	\$ 29.835	17,000	D
Common Stock	06/04/2008	S	800	D	\$ 29.84	16,200	D
Common Stock	06/04/2008	S	100	D	\$ 29.845	16,100	D
Common Stock	06/04/2008	S	400	D	\$ 29.85	15,700	D
Common Stock	06/04/2008	S	100	D	\$ 29.855	15,600	D
Common Stock	06/04/2008	S	1,200	D	\$ 29.86	14,400	D
Common Stock	06/04/2008	S	600	D	\$ 29.87	13,800	D
Common Stock	06/04/2008	S	500	D	\$ 29.88	13,300	D
Common Stock	06/04/2008	S	100	D	\$ 29.885	13,200	D
Common Stock	06/04/2008	S	500	D	\$ 29.89	12,700	D
Common Stock	06/04/2008	S	300	D	\$ 29.9	12,400	D

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

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.

SEC 1474
(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: ACORDA THERAPEUTICS INC - Form 4

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. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
--	--	--------------------------------------	--	--------------------------------	---	--	---	--	--

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
LAWRENCE DAVID 15 SKYLINE DRIVE HAWTHORNE, NY 10532			Chief Financial Officer	

Signatures

/s/ David
Lawrence

06/06/2009

**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).

Remarks:

Page 2 of 2

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.