#### ACORDA THERAPEUTICS INC

Form 4

December 02, 2009

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

**OMB APPROVAL** 

**OMB** 3235-0287 Number:

January 31, Expires: 2005

0.5

Estimated average burden hours per response...

Check this box if no longer subject to Section 16.

Form 4 or

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Wasman Jane Issuer Symbol ACORDA THERAPEUTICS INC (Check all applicable) [ACOR] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner \_X\_\_ Officer (give title \_ \_\_ Other (specify (Month/Day/Year) below) 15 SKYLINE DRIVE 12/01/2009 Exec VP, General Counsel & Sec (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

#### HAWTHORNE, NY 10532

(Ctata)

| (City)     | (State)               | (Zip) Tab          | le I - Non- | Derivative | Secu      | rities Acqui   | red, Disposed of, | or Beneficiall | y Owned      |
|------------|-----------------------|--------------------|-------------|------------|-----------|----------------|-------------------|----------------|--------------|
| 1.Title of | 2. Transaction Date   | 2A. Deemed         | 3.          | 4. Securi  | ties A    | cquired (A)    | 5. Amount of      | 6.             | 7. Nature of |
| Security   | (Month/Day/Year)      | Execution Date, if | Transactio  | omr Dispos | sed of    | (D)            | Securities        | Ownership      | Indirect     |
| (Instr. 3) |                       | any                | Code        | (Instr. 3, | 4 and     | 5)             | Beneficially      | Form:          | Beneficial   |
|            |                       | (Month/Day/Year)   | (Instr. 8)  |            |           |                | Owned             | Direct (D)     | Ownership    |
|            |                       |                    |             |            |           |                | Following         | or Indirect    | (Instr. 4)   |
|            |                       |                    |             |            | (4)       |                | Reported          | (I)            |              |
|            |                       |                    |             |            | (A)       |                | Transaction(s)    | (Instr. 4)     |              |
|            |                       |                    | Code V      | Amount     | or<br>(D) | Price          | (Instr. 3 and 4)  |                |              |
| Common     |                       |                    |             |            |           | \$             |                   |                |              |
| Stock      | 12/01/2009 <u>(1)</u> |                    | S           | 5,000      | D         | 24.5013<br>(2) | 33,664            | D              |              |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Person

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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.  onNumber of Derivative Securities Acquired (A) or Disposed of (D) |                     | ate                | 7. Title a<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 a | of<br>ng<br>s | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Own<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|--------------------------------------|---|--|---|---------------------|--------------------|--|---------------|---|--|
|   |   |                                      |   | Code V                                 | (Instr. 3, 4, and 5)  (A) (D)   | Date<br>Exercisable | Expiration<br>Date | or<br>Title Nu<br>of   | umber         |   |  |

# **Reporting Owners**

| Reporting Owner Name / Address                         | Relationships |           |   |       |  |  |  |
|--|---------------|-----------|---|-------|--|--|--|
|  | Director      | 10% Owner | Officer                                 | Other |  |  |  |
| Wasman Jane<br>15 SKYLINE DRIVE<br>HAWTHORNE, NY 10532 |               |           | Exec VP,<br>General<br>Counsel &<br>Sec |       |  |  |  |

## **Signatures**

/s/ Jane Wasman 12/02/2009

\*\*Signature of Pate 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).
- (1) Sale pursuant to a 10b5-1 plan. These sales are primarily intended to cover the tax liability resulting from restricted stock vesting.
- The price reported represents the weighted average sales price of shares sold in multiple transactions at prices ranging from \$24.18 to (2) \$24.86 per share. The reporting person will provide to the issuer, any security holder of the issuer or the SEC staff, upon request, information regarding the number of shares sold at each price within the range.

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.

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