ACORDA THERAPEUTICS INC

Form 4

November 15, 2007

FORM 4,	FC	R	M	4	T
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Check this box

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

January 31, Expires:

OMB APPROVAL

2005

0.5

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if no longer subject to Section 16. Form 4 or 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 * Blight Andrew			2. Issuer Name and Ticker or Trading Symbol ACORDA THERAPEUTICS INC [ACOR]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
(Last) 15 SKYLINE	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 11/15/2007	Director 10% Owner _X Officer (give title Other (specify below) Chief Scientific Officer
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person
HAWTHORNE, NY 10532				Form filed by More than One Reporting Person

(City)	(State) (Z	Zip) Table	I - Non-Do	erivative S	Securi	ties Acqu	ired, Disposed of	, or Beneficial	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	(Instr. 3,	ispose 4 and (A) or	d of (D) 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)
Restricted Stock	11/15/2007(1)		Code V S	Amount 1,695	(D)	Price \$ 18.45	39,544	D	
Restricted Stock	11/15/2007(1)		S	800	D	\$ 18.4	38,744	D	
Restricted Stock	11/15/2007(1)		S	1,000	D	\$ 18.35	37,744	D	
Restricted Stock	11/15/2007(1)		S	101	D	\$ 18.3	37,643	D	
Restricted Stock	11/15/2007(1)		S	300	D	\$ 18.29	37,343	D	

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Restricted Stock	11/15/2007(1)	S	200	D	\$ 18.28	37,143	D
Restricted Stock	11/15/2007 <u>(1)</u>	S	500	D	\$ 18.25	36,643	D
Restricted Stock	11/15/2007 <u>(1)</u>	S	369	D	\$ 18.24	36,274	D
Restricted Stock	11/15/2007 <u>(1)</u>	S	32	D	\$ 18.16	36,242	D
Restricted Stock	11/15/2007 <u>(1)</u>	S	268	D	\$ 18.15	35,974	D
Restricted Stock	11/15/2007 <u>(1)</u>	S	600	D	\$ 18.1	35,374	D

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

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SEC 1474 (9-02)

> 9. Nu Deriv Secur Bene Owner Follo Repo Trans (Instr

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	١
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orNumber	Expiration Da	ate	Amour	nt of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)]
	Derivative				Securities			(Instr. :	3 and 4)		(
	Security				Acquired						1
					(A) or]
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
						D.	г		or		
						Date	Expiration	Title 1	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address				•	
	Director	10% Owner	Officer		Other

Blight Andrew

15 SKYLINE DRIVE Chief Scientific Officer HAWTHORNE, NY 10532

Reporting Owners 2

Relationships

Signatures

/s/ Andrew Blight 11/15/2007

**Signature of Date
Reporting Person

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.

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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