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ACORDA T Form 4 June 11, 201	HERAPEUTICS	5 INC								
FORM								OMB APPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287	
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								Expires: Estimated burden hou response	urs per	
(Print or Type I	Responses)									
1. Name and Address of Reporting Person <u>*</u> SMITH IAN F			2. Issuer Name and Ticker or Trading Symbol ACORDA THERAPEUTICS INC [ACOR]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(3. Date of Earliest Transaction(Month/Day/Year)06/09/2015			X_ Director 10% Owner Officer (give title Other (specify below)below)				
Fil			Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
ARDSLEY	, NY 10502						Person		eponing	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Securities A	cquired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	ed Date, if	3. Transactio Code (Instr. 8)	4. Securit onAcquired Disposed	ties (A) or of (D)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Reminder: Rep	oort on a separate lin	e for each cla	ass of sec	urities bene	ficially ow	ned directly of	or indirectly.			
					inforr requi	nation cont red to resp	spond to the collec ained in this form ond unless the for ntly valid OMB con	are not m	SEC 1474 (9-02)	

 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. Number of	6. Date Exercisable and	7. Title and Amou
Derivative Security	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securi
(Instr. 3)	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

number.

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	Price of Derivative Security		(Month/Day/Year)	(Instr. 8) Acquired (A) or Disposed o (D) (Instr. 3, 4, and 5)						
				Code V	(A) (I	D) Date Exercisable	Expiration Date	Title	Amo or Nun of S	
Non-Employee Stock Option	\$ 30.49	06/09/2015		А	15,000	(1)	06/09/2025	Common Stock	15,	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SMITH IAN F 420 SAW MILL RIVER ROAD ARDSLEY, NY 10502	Х						
Signatures							
/s/ Ian Smith 06/1	1/2015						

**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).
- The shares subject to this option vest in four equal quarterly installments over 12 months beginning on June 9, 2015, with the first (1) quarterly installment vesting on September 9, 2015.

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.