## Edgar Filing: ACORDA THERAPEUTICS INC - Form 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. STATEMENT C	S SECURITIES AND EXC Washington, D.C. 205 DF CHANGES IN BENEFIC SECURITIES Section 16(a) of the Securities Public Utility Holding Comp ) of the Investment Company	<b>49</b> C <b>IAL OW</b> I es Exchang pany Act of	NERSHIP OF e Act of 1934, f 1935 or Sectior	OMB Number: Expires: Estimated a burden hour response		
See Instruction 30(II 1(b).	) of the investment company					
(Print or Type Responses)						
1. Name and Address of Reporting Person <u>*</u> COHEN RON	2. Issuer Name <b>and</b> Ticker or T Symbol ACORDA THERAPEUTI [ACOR]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 15 SKYLINE DRIVE	3. Date of Earliest Transaction (Month/Day/Year) 08/05/2010	y/Year) Officer (give below)			e title 10% Owner e title Other (specify below) sident and CEO	
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)		<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
HAWTHORNE, NY 10532 (City) (State) (Zip)			Person			
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Dec Executi Executi any		es Acquired posed of (D)	uired, Disposed of, 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	
Common 08/05/2010 Stock		A \$2.6	341,551	D		
Common 08/05/2010 Stock	S 48,217	(1)	293,334	D		
Common 08/05/2010 Stock	S 6,783	$D \qquad \begin{array}{c} \$ \\ 36.51 \\ \underline{(2)} \end{array}$	286,551	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)

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#### required to respond unless the form displays a currently valid OMB control number.

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

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. Transactio Code (Instr. 8)	Secu Secu Acqu or Di (D)	rities hired (A) sposed of r. 3, 4,	6. Date Exercis Expiration Dat (Month/Day/Y	e	7. Title and A Underlying S (Instr. 3 and 4	Securities
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 2.6	08/05/2010		М		55,000	09/11/2003	09/11/2013	Common Stock	55,000

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
COHEN RON 15 SKYLINE DRIVE HAWTHORNE, NY 10532			President and CEO				
Signatures							

/s/ Ron Cohen	08/09/2010
<u>**</u> 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 price reported represents the weighted average sales price of shares sold in multiple transactions at prices ranging from \$35.33 to (1) \$36.33 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.

The price reported represents the weighted average sales price of shares sold in multiple transactions at prices ranging from \$36.44 74 to (2) \$36.72 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.