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ACORDA THERAPEUTICS INC Form 3 February 09, 2006 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549

INITIAL STATEMENT OF 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 <u>*</u> Blight Andrew			Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol ACORDA THERAPEUTICS INC [ACOR]				
(Last)	(First)	(Middle)	02/09/2006	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
C/O ACORDA THERAPEUTICS, INC., 15 SKYLINE DRIVE (Street) HAWTHORNE, NY 10532				(Check all applicable) Director 10% Owner X Officer Other (give title below) (specify below) Chief Scientific Officer		Owner r ow) r	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City)	(State)	(Zip)	Table I - N	Non-Derivat	ive Securiti	ies Bei	neficially Owned	
1.Title of Secur (Instr. 4)	rity		2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	•	
Common Sto	ock		98,986		D	Â		
Reminder: Repo owned directly		ate line for ea	ch class of securities benefici	ially S	EC 1473 (7-02	.)		
	inform requir	ation conta ed to respo	bond to the collection of nined in this form are not nd unless the form displa MB control number.					
Т	able II - Der	ivative Secu	rities Beneficially Owned (e.	.g., puts, calls,	warrants, opt	tions, co	onvertible securities)	

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	Ownership
		(Instr. 4)	Price of	Derivative	(Instr. 5)
			Derivative	Security:	

OMB	3235-0104				
Number:					
Expires:	January 31, 2005				
Estimated av					
burden hours per					
response	0.5				

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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Non-Employee Stock Option (right to buy)	(1)	04/01/2006	Common Stock	1,282	\$ 1.56	D	Â
Non-Employee Stock Option (right to buy)	(1)	04/01/2006	Common Stock	3,525	\$ 1.56	D	Â
Non-Employee Stock Option (right to buy)	(1)	12/11/2006	Common Stock	641	\$ 1.56	D	Â
Non-Employee Stock Option (right to buy)	(1)	08/01/2008	Common Stock	6,410	\$ 2.6	D	Â
Non-Employee Stock Option (right to buy)	(1)	01/01/2011	Common Stock	2,564	\$ 2.6	D	Â
Non-Employee Stock Option (right to buy)	(1)	12/31/2011	Common Stock	1,923	\$ 2.6	D	Â
Non-Employee Stock Option (right to buy)	(1)	09/05/2013	Common Stock	78,777	\$ 2.6	D	Â
Non-Employee Stock Option (right to buy)	(2)	01/01/2015	Common Stock	52,338	\$ 8.14	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Blight Andrew C/O ACORDA THERAPEUTICS, INC. 15 SKYLINE DRIVE HAWTHORNE, NY 10532	Â	Â	Chief Scientific Officer	Â		
Signatures						

orginature

/s/ Michelle Meyers, by power of 02/09/2006 attorney

**Signature of Reporting Person

Date

Explanation of Responses:

- If the form is filed by more than one reporting person, see Instruction 5(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) All of the shares subject to this option have vested.
- The shares subject to this option vest in equal quarterly installments beginning on 1/1/2005. (2)
- Â

Remarks:

Exhibit List - Exhibit 24 - Power of Attorney

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

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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.