ACORDA THERAPEUTICS INC

Form 4

November 21, 2006

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number: 3235-0287

OMB APPROVAL

Expires: January 31,

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Check this box if no longer subject to Section 16. Form 4 or

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 * LAWRENCE DAVID | | | 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) DRIVE | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 11/20/2006 | Director 10% Owner X Officer (give title Other (specify below) | | |
| | (Street) | Filed(Month/Day/Year) Applicable Lin | | 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) (Zip) Table I Non Derivative Securities Acquired Disposed of an

| | | | | | | - | ´ • | | • | | |
|--------------------------------------|---|---|---|--------|------------------|-------------|--|---|-----------------------------|--|--|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) | | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) | ect Beneficial Ownership | | |
| | | | Code V | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | (Instr. 4) | | | |
| Restricted stock | 11/20/2006(1) | | S | 100 | D | \$ 18.92 | 45,277 | D | | | |
| Restricted stock | 11/20/2006(1) | | S | 100 | D | \$ 18.63 | 45,177 | D | | | |
| Restricted stock | 11/20/2006(1) | | S | 58 | D | \$ 18.22 | 45,119 | D | | | |
| Restricted stock | 11/20/2006(1) | | S | 100 | D | \$ 18.17 | 45,019 | D | | | |
| Restricted stock | 11/20/2006(1) | | S | 100 | D | \$ 18.09 | 44,919 | D | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

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| Restricted stock | 11/20/2006 <u>(1)</u> | S | 200 | D | \$ 18.02 44,719 | D |
|------------------|-----------------------|---|-----|---|--------------------|---|
| Restricted stock | 11/20/2006 <u>(1)</u> | S | 100 | D | \$ 17.9 44,619 | D |
| Restricted stock | 11/20/2006 <u>(1)</u> | S | 100 | D | \$ 17.87 44,519 | D |
| Restricted stock | 11/20/2006 <u>(1)</u> | S | 100 | D | \$ 17.85 44,419 | D |
| Restricted stock | 11/20/2006(1) | S | 100 | D | \$ 17.76 44,319 | D |

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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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. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) | | ate | 7. Title and Amount of Underlying Securities (Instr. 3 and | Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|--------------------------------------|---|--|--|---------------------|--------------------|--|--------------------------------------|---|
| | | | | Code V | (Instr. 3, 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Amo or Title Num of Shar | nber | |

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

LAWRENCE DAVID 15 SKYLINE DRIVE HAWTHORNE, NY 10532

Chief Financial Officer

Signatures

/s/ David 11/21/2006 Lawrence

2 Reporting Owners

**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).
- (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.

Signatures 3