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February 09, 2006

FORM 3

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

OMB APPROVAL

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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 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement ACORDA THERAPEUTICS INC [ACOR] **COHEN RON** (Month/Day/Year) 02/09/2006 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) C/O ACORDA (Check all applicable) THERAPEUTICS, INC., 15 SKYLINE DRIVE 10% Owner Director (Street) _X__ Officer Other 6. Individual or Joint/Group (give title below) (specify below) Filing(Check Applicable Line) CEO and President _X_ Form filed by One Reporting Person HAWTHORNE, NYÂ 10532 Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 1. Title of Security 2. Amount of Securities 3. 4. Nature of Indirect Beneficial Ownership Beneficially Owned Ownership (Instr. 4) (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) Â Common Stock 356,537 D Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. Persons who respond to the collection of

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information contained in this form are not required to respond unless the form displays a

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

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

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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Series A Convertible Preferred Stock	(1)	(1)	Common Stock	5,923 (2)	\$ 6.972	D	Â
Non-Employee Stock Option (right to buy)	(3)	01/01/2011	Common Stock	38,792	\$ 2.6	D	Â
Non-Employee Stock Option (right to buy)	(3)	12/31/2011	Common Stock	6,410	\$ 2.6	D	Â
Non-Employee Stock Option (right to buy)	(3)	09/05/2013	Common Stock	569,307	\$ 2.6	D	Â
Non-Employee Stock Option (right to buy)	(3)	10/17/2013	Common Stock	38,461	\$ 2.6	D	Â
Non-Employee Stock Option (right to buy)	(4)	01/01/2015	Common Stock	51,265	\$ 8.14	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships					
corporating of the control of the co	Director	10% Owner	Officer	Other		
COHEN RON C/O ACORDA THERAPEUTICS, INC. 15 SKYLINE DRIVE HAWTHORNE, NY 10532	Â	Â	CEO and President	Â		

Signatures

/s/ Michelle Meyers, by power of attorney 02/08/2006

**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) The convertible preferred stock is convertible at any time, at the holder's discretion, and has no expiration date.
- (2) The number of shares underlying convertible preferred stock in column 3 of Table II represents the number of shares of Common Stock of the Issuer that the convertible preferred stock will automatically convert into upon the closing of the Issuer's initial public offering.
- (3) All of the shares subject to this option have vested.
- (4) The shares subject to this option vest in equal quarterly installments beginning on 1/1/2005.

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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. 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.

Reporting Owners 2