

ACORDA THERAPEUTICS INC

Reported by LAWRENCE DAVID

FORM 4/A

(Amended Statement of Changes in Beneficial Ownership)

Filed 06/18/07 for the Period Ending 03/22/07

Address 420 SAW MILL RIVER ROAD

ARDSLEY, NY 10502

Telephone 914-347-4300

CIK 0001008848

Symbol ACOR

SIC Code 2836 - Biological Products, Except Diagnostic Substances

Industry Biotechnology & Drugs

Sector Healthcare

Fiscal Year 12/31





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

OMB APPROVAL OMB Number: 3235-0287 Expires: January 31, 2008 Estimated average burden hours per response... 0.5

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(f) of the Investment Company Act of 1940

1. Name and Add	2. Iss	uer Nam	e and	Гіс	cker or	Tra	ding Sy	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
LAWRENCE DAVID				ORDA COR]	THE	RA	APEU	ΤI	CS IN	Director 10% Owner				
(Last)	(First)	(Middle)	3. Da							X_Officer (give title below) Other (specify below)				
15 SKYLINE	DRIVE				3/2	22	/2007				Chief Financial Officer			
	(Street)			Amendm DD/YYYY)		ite	Origina	al F	iled		6. Individual or Joint/Group Applicable Line)	Filing (Che	eck	
HAWTHORN	NE, NY 1	0532			2.10	_	12.00				V Farm filed by One Beneating De			
(City)	(State)	(Zip)		3/27/2007							_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person			
	ı	Table I - Non-l) Derivati	ve Secur	ities A	cq	uired, I	Disp	posed o	of, or H	Beneficially Owned			
1.Title of Security (Instr. 3)		2. Trans. Date	2A. Deemed Execution Date, if	3. Trans. Code (Instr. 8)		4. Securities Acquire (A) or Disposed of (D) (Instr. 3, 4 and 5)			Follow	unt of Securities Beneficially Owned ing Reported Transaction(s) 3 and 4)		Beneficial Ownership		
				any	Code	v	Amount	(A) or ot (D) Price				or Indirect (I) (Instr. 4)	(Instr. 4)	
Restricted stock			3/22/2007		s		340	D	\$19.71		23426	D		
Restricted stock			3/22/2007		s		1401	D	\$19.69		22025	D		
Restricted stock			3/22/2007		s		100	D	\$19.68		21925	D		
Restricted stock			3/22/2007		s		300	D	\$19.65		21625	D		
Restricted stock			3/22/2007		s		400	D	\$19.64		21225	D		
Restricted stock			3/22/2007		S		500	D	\$19.63		20725	D		
Restricted stock			3/22/2007		s		800	D	\$19.62		19925	D		
Restricted stock			3/22/2007		s		300	D	\$19.61		19625	D		
Restricted stock			3/22/2007		S		500	D	\$19.60		19125	D		
Restricted stock			3/22/2007		s		100	D	\$19.58		19025	D		
Restricted stock			3/22/2007		s		200	D	\$19.57		18825	D		
Restricted stock			3/22/2007		s		1000	D	\$19.55		17825	D		

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Trans. Date	3A. Deemed Execution Date, if any		8)	Dispose	ive			Secur Deriv	rities Underlying vative Security	Derivative Security (Instr. 5)	of derivative Securities Beneficially Owned Following	Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction (s) (Instr. 4)	4)	

Explanation of Responses:

Remarks:

This amendment is to correct the direct beneficial holdings of the reporting person.

Reporting Owners

Paparting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
LAWRENCE DAVID									
15 SKYLINE DRIVE			Chief Financial Officer						
HAWTHORNE, NY 10532									

Signatures

/s/ David Lawrence 6/18/2007

** Signature of Reporting Person

Date

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

- * 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).

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

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.