## Edgar Filing: ALKERMES INC - Form 4

ALKERME	S INC									
Form 4 November 2	20. 2008									
FORM	ЛЛ								PPROVAL	
	UNITED	STATES		RITIES A shington	N OMB Number:	3235-0287				
Check th if no lon subject t Section Form 4 Form 5 obligatio may con	nger 16. or Dns tinue. Section 17(		Estimated burden hou response	urs per						
<i>See</i> Instr 1(b).	ruction	50(11)	JI THE II	nvestmen	t Compa	ny Act of 1	940			
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> BIBERSTEIN KATHRYN L			Symbol	er Name <b>an</b>		-	5. Relationship of Reporting Person(s) to Issuer			
(1 +)	(Einst)			RMES IN	L	5]	(Check all applicable)			
(Last) (First) (Middle) 88 SIDNEY STREET			3. Date of Earliest Transaction (Month/Day/Year) 11/19/2008				Director 10% Owner X Officer (give title Other (specify below) below) SVP, General Counsel			
(Street) 4. If Amend Filed(Month					-	ıl	Applicable Line) _X_ Form filed by	<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>		
CAMBRIL	OGE, MA 02139						Person		1 0	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed 3. (Month/Day/Year) Execution Date, if Transaction any Code (Month/Day/Year) (Instr. 8)		Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	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 Beneficial Ownership (Instr. 4)			
				Code V	Amount	(D) Price				
Reminder: Re	port on a separate line	e for each cla	ss of sec	urities bene	Perso inforn requir	ns who res nation cont red to respo	or indirectly. spond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)	

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title a
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative Securities	Expiration Date	Underlyi
Security	or Exercise		any	Code	Acquired (A) or	(Month/Day/Year)	(Instr. 3

number.

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(Instr. 3)	Price of Derivative		(Month/Day/Year)	(Instr. 8) Disposed of (D) (Instr. 3, 4, and 5)						
	Security			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title
Non-Qualified Stock Option (right to buy)	\$ 7.69	11/19/2008		D <u>(1)</u>			172,988	02/03/2004	02/03/2013	Comm Stocł
Non-Qualified Stock Option (right to buy)	\$ 7.69	11/19/2008		A <u>(2)</u>		172,988		<u>(3)</u>	02/03/2013	Comm Stocl

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
BIBERSTEIN KATHRYN L 88 SIDNEY STREET CAMBRIDGE, MA 02139			SVP, General Counsel					
Signatures								
Jennifer Baptiste, Attorney-in-I Biberstein	11/20/2008							
<u>**</u> Signature of Reportin		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).

Cancellation of non-qualified stock option by mutual agreement of Alkermes and the reporting person. As consideration for the(1) cancellation, the reporting person was granted a new stock option under the Company's 2008 Stock Option and Incentive Plan with the same terms, including exercise price, vesting and number of shares, as the cancelled stock option.

Re-grant of non-qualified stock option under the 2008 Stock Option and Incentive Plan as consideration for the cancellation of the(2) non-qualified stock option. Re-granted non-qualified option has the same terms as the cancelled option, including exercise price, vesting and number of shares.

(3) Stock option vests in its entirety upon date of grant.

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.