FRATES JAMES M

Form 4

September 14, 2011

FΟ	R	M	4
----	---	---	---

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

OMB Number:

3235-0287

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, 2005

SECURITIES

Estimated average burden hours per

response...

Expires:

0.5

OMB APPROVAL

Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

subject to

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)

See Instruction

1. Name and Address of Reporting Person ** FRATES JAMES M			2. Issuer Name and Symbol ALKERMES INC	_	5. Relationship of Reporting Person(s) to Issuer				
<i>(</i> 7	(E')	0.5.1.11			(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest Tra	nsaction					
852 WINTE	ER ST.		(Month/Day/Year) 09/01/2011		Director 10% Owner X Officer (give title Other (specibelow) SVP, CFO & Treasurer				
	(Street)		4. If Amendment, Date	e Original	6. Individual or Joint/Group Filing(Check	k			
WALTHAM	м, MA 02451		Filed(Month/Day/Year)		Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-De	erivative Securities Acq	uired, Disposed of, or Beneficially Own	ieo			
1.Title of	2. Transaction	Date 2A. Deer	med 3.	4. Securities Acquired	5. Amount of 6. Ownership 7. Nat	ur			

(City)	(State)	Zip) Table	e I - Non-	-De	erivative So	ecuriti	ies Acq	uired, Disposed o	of, or Beneficial	ly Owned
1.Title of	2. Transaction Date	2A. Deemed	3.		4. Securiti	ies Ac	quired	5. Amount of	6. Ownership	7. Nature of
Security	(Month/Day/Year)	Execution Date, if	Transac	tioı	n(A) or Dis	posed	of	Securities	Form: Direct	Indirect
(Instr. 3)		any	Code		(D)			Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4	and 5	i)	Owned	Indirect (I)	Ownership
								Following	(Instr. 4)	(Instr. 4)
						(A)		Reported		
						(A)		Transaction(s)		
			Code	V	Amount	(D)	Price	(Instr. 3 and 4)		
Common	00/01/2011		C ,	T 7	10.000	ъ	Φ.Ω	74.606	Ъ	
Stock	09/01/2011		G	V	10,000	D	\$ 0	74,606	D	
Common								4,000	ī	By Sons
Stock								4,000	1	by Solls

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Edgar Filing: FRATES JAMES M - Form 4

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		4. T	5.	6. Date Exerc		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						`
					4, and 5)						
					.,						
									Amount		
						Date	Evaluation		or		
							Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
FRATES JAMES M 852 WINTER ST. WALTHAM MA 02451			SVP, CFO & Treasurer					

Signatures

/s/ Jennifer Baptiste, attorney-in-fact for James M.

Frates 09/14/2011

**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).

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