FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| | | | | | | | | , | , | | | | ' ' | | | | | | | | | |
|--|---|----------------|--|---|---------|-------|--|---------------|---|---------------|---|-------|--|---|-----------------|----------------------|--|------------------|---|--------|--|--|
| 1. Name and Address of Reporting Person* <u>Keese Kyle</u> | | | | | | | 2. Issuer Name and Ticker or Trading Symbol Emergent BioSolutions Inc. [EBS] | | | | | | | | | | Check all | appli Directo | or | ng Per | 10% C | wner |
| (Last) (First) (Middle) 2273 RESEARCH BLVD. SUITE 400 | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/27/2010 | | | | | | | | | | | Officer elow) | | | below) | (specify |
| (Street) ROCKVILLE MD 20850 (City) (State) (Zip) | | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | | Table | e I - Nor | n-Deriv | ative | Se | curit | ies Ac | quire | ed, Di | isp | osed o | f, or | Ben | efici | ally Ov | vnec | d | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D. | | | | | | | | Execut if any | A. Deemed xecution Date, any Month/Day/Year) | | Transaction [| | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | 4 and Secur Benef Owne | | rities ficially d Following (| | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | Со | ode V | | Amount | [| A) or D) | Price | Tra | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | | | |
| Common Stock 05/27/ | | | | | | | | | | | (1) | | 5,276 | | A | \$0 | (1) | 14,346 | | | D | |
| Common Stock 08/18/ | | | | | | | | | | | S | | 5,276 | 5 | D | \$1 | 7.5 | 9,070 | | | D | |
| | | | Та | ble II - C | | | | | | | | | sed of, onvertib | | | | | ed | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversio or Exercis Price of Derivative Security | on Da se (M | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | | ransaction Code (Instr. | | of E | | 5. Date Exercisable and Expiration Date Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 8. Price Derivati Security (Instr. 5) | ative ity S | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | F C | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | Code | v | (A) | (D) | Date Exerc | cisable | | Expiration Date | Title | or Nur of | ount mber ires | | | | | | |

Explanation of Responses:

 $1. In-kind\ pro\ rata\ distribution\ from\ BioPharm,\ L.L.C.,\ of\ which\ the\ reporting\ person\ is\ a\ non-managing\ member,\ for\ no\ consideration.$

Remarks:

<u>/s/R. Don Elsey</u> <u>08/25/2010</u>

** Signature of Reporting Person Date

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

- * 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 Number.