## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	205/19
wasinigton,	D.C.	20040

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPI	ROVAL
OMB Number:	3235-0287
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0.5

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Check this box if no longer subject to 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*  Niederhuber John					2. Issuer Name <b>and</b> Ticker or Trading Symbol Emergent BioSolutions Inc. [ EBS ]								heck a	all applic	cable)	g Per	son(s) to Iss		
		<del></del>			3 [	2. Date of Earlingt Transaction (Month/Day/Year)								X		(give title		10% Ov Other (s	·
(Last) 2273 RE		3. Date of Earliest Transaction (Month/Day/Year) 05/19/2011									below)			below)					
			4. If	If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street)	ILLE M	ID	20850									Li	X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)												Persor	ı ´		·	
		Tab	le I - Noi	n-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed o	of, or Be	eneficia	ally C	Owned	I			
Date			2. Trans Date (Month/I		ar)   I	2A. Deemed Execution Date, if any (Month/Day/Year)		, Transaction Disposed Of ( Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4		4 and Securiti Benefic Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or Price	rice Reporte Transac (Instr. 3		tion(s)			
Common Stock <sup>(1)</sup> 05/1					9/2011	2011		A		3,600 <sup>(2)</sup> A		. \$	)	9,000			D		
		7	able II -						uired, E s, optior						vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code (1 8)		of E		Expiration	6. Date Exercisal Expiration Date (Month/Day/Year)		Amount of		Der Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisab		xpiration ate	Title	Amount or Number of Shares						
Director Stock Option (right to	\$22.02	05/19/2011			A		7,200		(3)	0	5/18/2021	Common Stock	7,200		\$0	7,200		D	

## **Explanation of Responses:**

- 1. Consists of restricted stock units granted under the Amended and Restated Emergent BioSolutions Inc. 2006 Stock Incentive Plan.
- 2. These restricted stock units vest in three equal annual installments beginning on the first anniversary of the date of grant, assuming continued service with the company. Each restricted stock unit represents the right of the Reporting Person to receive one share of common stock of Emergent BioSolutions Inc., subject to adjustment as provided in the grant agreement.
- 3. The option will vest in three equal installments on May 19, 2012, May 19, 2013 and May 19, 2014 or, if the Company's Annual Meeting of Stockholders occurs prior to such date for any year, on the day prior to such year's Annual Meeting of Stockholders.

## Remarks:

/s/R. Don Elsey, attorney-infact 05/23/2011

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.