FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | | | |
|---------------------|----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | | |
| Estimated average b | ourden | | | | | | | | | |

0.5

hours per response:

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| Name and Address of Reporting Person* Hauer Jerome M | | | | | | 2. Issuer Name and Ticker or Trading Symbol Emergent BioSolutions Inc. [EBS] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|---|--|---|----------|---|--|---|------|--|----------------------|-----------------------|--|---|--|---|--|---|--|
| Hauer Jeroine M | | | | | I^{-} | | | | | | | - | | X | Direc | ctor | 10% | Owner |
| (Last) 400 PRO | (Fii | rst) (LL DR, SUITE 4 | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/19/2016 | | | | | | | | | Offic below | er (give title w) | Other (specify below) | |
| | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Indi | Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) GAITHERSBURG MD 20879 | | | | | | | | | | | | | X | Form filed by One Reporting Person | | | | |
| —————————————————————————————————————— | | | | - | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | |
| | | Tabl | e I - No | on-Deriv | /ative | Sec | uritie | s Ac | quired | l, Dis | sposed o | f, or I | 3enef | icially | Owne | ed | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day) | | | | | Execution Date, | | Code (Instr. | | | | | and 5) Secu Bene | | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code V | | Amount | (A) or (D) Prid | | ice | Transaction(s) (Instr. 3 and 4) | | | (111341.4) |
| Common Stock ⁽¹⁾ 05/19 | | | | | 2016 | 016 | | A | | 5,985 ⁽²⁾ | A | . ; | \$0.00 | 2 | 20,085 | D | | |
| Common Stock ⁽¹⁾ 05/1 | | | | 05/19/ | 2016 | | | | S | | 3,134(3) | Г | \$4 | 4 1.22 ⁽⁴⁾ | 16,951 | | D | |
| | | Та | ble II - | | | | | | | | osed of, convertib | | | | wned | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exerc Expiration Da (Month/Day/Y | | ite | 7. Title and Amount of Securities Underlying Derivative Security (Instrand 4) | | Deri Sec (Ins | rice of ivative urity tr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amou or Numb of Share | er | | | | |

Explanation of Responses:

- 1. Consists of restricted stock units granted under the Third Amended and Restated Emergent BioSolutions Inc. 2006 Stock Incentive Plan.
- 2. The restricted stock units vest in three equal annual tranches beginning in May 2017.
- 3. The restricted stock units vest annually in May 2016 through May 2018.
- 4. The price reported is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$41.20 to \$41.30, inclusive.

/s/ Eric Burt, attorney-in-fact 05/23/2016

** 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 Number.