Instruction 1(b).

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to | STATEMENT OF C       |
|--|----------------------|
| Section 16. Form 4 or Form 5           | 017(12)(12)(11) 01 0 |
| obligations may continue. See          |                      |

## HANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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*     SULLIVAN LOUIS W    |   |  |   |                 |        | 2. Issuer Name <b>and</b> Ticker or Trading Symbol  Emergent BioSolutions Inc. [ EBS ]  |       |   |                  |  |                       |                 |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |   |   |   |  |                                       |  |
|---|---|--|---|-----------------|--------|---|-------|---|------------------|--|-----------------------|-----------------|--|---|---|---|---|--|---------------------------------------|--|
| (Last)  | (Fi   |  | (Middle)                                      |                 |        | 3. Date of Earliest Transaction (Month/Day/Year) 03/11/2016  X Director 10% Owner Officer (give title below) Other (specific below) |       |   |                  |  |                       |                 |  |   |   |   |   |  | ·                                     |  |
| (Street) GAITHERSBURG MD 20879  (City) (State) (Zip)          |   |  |   |                 | _   4. | 4. If Amendment, Date of Original Filed (Month/Day/Year)  |       |   |                  |  |                       |                 |  | Indiv<br>ne)<br>X   |   |   |   |  |                                       |  |
|   |   | Tab  | le I - No                                     | n-Deri          | vativ  | e Se  | curit | ties Ac                                 | quired           | , Dis  | sposed o              | f, or Be        | neficia                                  | lly (   | Owned   |   |   |  |                                       |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |   |  |   | Execution Date, |        | xecution Date,<br>any   |       | 3.<br>Transaction<br>Code (Instr.<br>8) |                  | 4. Securities Acquired (A) o<br>Disposed Of (D) (Instr. 3, 4 a |                       |                 | and 5) Securitie<br>Benefici<br>Owned F  |   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |                                       |  |
|   |   |  |   |                 |        |   | Code  | v                                       | Amount           | (A) or<br>(D)  | Price                 |                 | Reported<br>Transact<br>(Instr. 3        | tion(s)   |   |   | (Instr. 4)  |  |                                       |  |
| Common  | nmon Stock <sup>(1)</sup> 03/1  |  |   | /2016           | 2016   |   |       |   |                  | 14,879   | A                     | \$10.           | 28                                       | 43,   | ,379  | D   |   |  |                                       |  |
| Common  | Stock <sup>(1)</sup>  |  |   | 03/11           | /2016  |   |       |   | S                |  | 14,879                | D               | \$34.0                                   | <b>3</b> <sup>(2)</sup>   | 28,   | ,500  | D   |  |                                       |  |
|   |   | -  | Table II -                                    |                 |        |   |       |   |                  |  | osed of,<br>convertil |                 |  |   | wned  |   |   |  |                                       |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemo<br>Execution<br>if any<br>(Month/Da | Date,           |        | ransaction<br>code (Instr.  |       | n of                                    |                  | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                       |                 | d Amoun<br>ies<br>g<br>Security<br>nd 4) | Derivativ<br>Security   |   | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | e O<br>s<br>slly D<br>o<br>g (!)                    | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |   |  |   | Cod             | Code   | v   | (A)   | (D)                                     | Date<br>Exercisa |  | Expiration<br>Date    | Title           | Amoun<br>or<br>Numbe<br>of<br>Shares     | r   |   |   |   |  |                                       |  |
| Stock<br>Option <sup>(1)</sup>                                | \$10.28   | 03/11/2016                                 |   |                 | M      |   |       | 14,879                                  | (3)              |  | 06/29/2016            | Common<br>Stock | 14,879                                   | 9   | \$0   | 0   |   | D  |                                       |  |

## **Explanation of Responses:**

- 1. Consists of an option granted under the company's stock incentive plan on June 30, 2006.
- 2. The price reported is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$34.00 to \$34.36, inclusive.
- 3. The option vested in three equal installments in June 2007, 2008 and 2009.

03/14/2016 /s/ Eric Burt, attorney-in-fact

\*\* 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.