FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-028

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

	OMB Number: Estimated average bu	3235-0287	
	hours per response:	0.5	
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ip of Re	eporting Person(s) to	Issuer]
ctor	10%	Owner	1

	nd Address of	Reporting Person*						ker or Tradin PHARM	g Symbol ACEUTI	CALS I		Relationsh	ip of Reportir plicable)	ng Pers	on(s) to Issu	ier
VAGE	LUS F KC	<u>J 1</u>			REG							X Dire	ctor		10% Ov	vner
(Last) (First) (Middle) 777 OLD SAW MILL RIVER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 12/14/2010							Offi bel	cer (give title w)		Other (s below)	specify
(Street)				— [4.	. If Ame	endment, [Date o	of Original Fi	led (Month/D	ay/Year)		Individual ne)	or Joint/Group	p Filing	(Check App	licable
TARRY	TOWN N	Y	10591									,	m filed by On	ie Repo	orting Persor	1
(City)	(S	State)	(Zip)										m filed by Mo son	ore than	one Repor	ting
		Та	ble I - Non-D	erivati	ve Se	ecuritie	s Ac	quired, D	isposed	of, or Be	neficia	lly Own	ed			
Dat			Transaction te onth/Day/		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (In	ion Dispose	. Securities Acquired (A) isposed Of (D) (Instr. 3, 4		d 5) Secu Bene Own	5. Amount of Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									V Amount	(A) o	r Price	Trans	eported ransaction(s) nstr. 3 and 4)			(Instr. 4)
			Table II - De	rivativ	0 500		_									
1. Title of Derivative Security (Instr. 3)									sposed of s, convert			y Owne	l			
Derivative Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		4. Transa	s, cal		er of ve es d (A) sed	s, options	cisable and		d Amount ies g Security		of 9. Numb ive derivativ y Securitic Owned Followir Reporte	ve es ially ng	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transa	s, cal	5. Number Derivative Securities Acquired or Disposof (D) (In	er of ve es d (A) sed estr. 5)	6. Date Exer	cisable and oate (Year)	7. Title an of Securit Underlyin Derivative	d Amount ies g Security	8. Price Deriva Securi (Instr. !	of 9. Numb ve derivativ y Securiti) Benefici Owned Followir	ve es ially ng d tion(s)	Ownership Form: Direct (D) or Indirect	of Indirect Beneficial Ownershi (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transa Code (8)	action (Instr.	5. Number Derivative Securities Acquired or Dispoor of (D) (In 3, 4 and 9)	er of ve es di (A) sed istr. 5)	6. Options 6. Date Exel Expiration I (Month/Day)	cisable and oate (Year)	7. Title an of Securit Underlyin Derivative (Instr. 3 at	d Amounties g e Security nd 4) Amount or Number	8. Price Derivar Securir (Instr. 9	of 9. Numb ive derivativ y Securitii Owned Followir Reporte Transac	ve es ially ng d tion(s)	Ownership Form: Direct (D) or Indirect	of Indirect Beneficial Ownershi (Instr. 4)

Explanation of Responses:

- 1. The stock option award (combined incentive stock option and non-qualified stock option) vests in four equal annual installments, commencing one year after the date of grant.
- 2. Exercisable date, exercise date, exercise price, purchase price, sales price, and/or expiration date is not applicable in this case.

<u>/s/**P. Roy Vagelos</u> <u>12/20/2010</u>

** 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.