FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWN
obligations may continue. See Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Name and Address of Reporting Person* McGahn Daniel P					<u>A</u> 1	2. Issuer Name and Ticker or Trading Symbol AMERICAN SUPERCONDUCTOR CORP DE/ [AMSC]												of Reporting cable) or (give title	g Pers	son(s) to Iss 10% Ov Other (s	vner		
(Last) (First) (Middle) C/O AMERICAN SUPERCONDUCTOR CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 12/08/2009											X Officer (give title Other (specify below) SVP/GM AMSC Superconductors						
64 JACKSON ROAD					4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)												6. Individual or Joint/Group Filing (Check Applicable					
(Street)	S M	Α (01434			Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person																	
(City)	(St	tate) ((Zip)																				
		Tab	le I - No	n-Deri	vative	Sec	uriti	ies Ac	quir	ed, D	isp	osed o	of, o	r Be	nefic	cially	y Owned	l					
Da			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)			ansact ide (In:		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)						es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership			
						Co	de \	,	Amount		(A) or (D)	Pri	ice	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)					
Common	Stock			12/0	12/08/2009				ı	M		4,500)	A	\$1	14.55	60,	,290		D			
Common Stock				12/0	12/08/2009				S	(1)		2,900)	D	\$	34.7	57,	7,390		D			
Common	Common Stock				2/08/2009				S	(1)		1,600)	D	\$3	34.64	55,790 ⁽²⁾			D			
Common Stock																	81	.8 ⁽³⁾	(3) I		By 401(k) Plan		
		Т	able II -									sed of onverti					Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeming Execution if any (Month/Da	Date,		Transaction Code (Instr.		of		e Exer ation D h/Day/	ate	ble and	Ame Sec Und Der	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall 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)	(D)	Date Exerc	isable		kpiration ate	Title	e	Amo or Num of Shar	ber							
Stock Option (Right to	\$14.55	12/08/2009			M			4,500	(-	4)	05	5/15/2017		nmon tock	4,5	00	\$0.00	25,500		D			

Explanation of Responses:

- 1. The sale was made solely to cover Mr. McGahn's tax liability arising from the December 2009 vesting of 4,000 shares of restricted common stock pursuant to a restricted stock award made to Mr. McGahn in
- $2.\ Following\ all\ the\ transactions\ reported\ on\ this\ Form\ 4,\ the\ reporting\ person\ holds\ 55,790\ shares\ directly.$
- 3. Following all the transactions reported on this Form 4, the reporting person holds 818 shares indirectly through the company's 401(k) plan as of November 30, 2009.
- 4. The options (30,000 shares) were granted on May 15, 2007 and vest in equal annual installments over a three year period, and will be fully vested on May 15, 2010.

Remarks:

/s/ Daniel P. McGahn

12/10/2009

** Signature of Reporting Person

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.