#### ACHILLION PHARMACEUTICALS INC

Form 4

September 02, 2014

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**OMB APPROVAL** 

**OMB** Number:

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Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Washington, D.C. 20549

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

Form 5

(Print or Type Responses)

1. Name and Address of Reporting Person \* RA CAPITAL MANAGEMENT, LLC

2. Issuer Name and Ticker or Trading Symbol

Issuer

5. Relationship of Reporting Person(s) to

**ACHILLION** 

(Month/Day/Year)

08/28/2014

PHARMACEUTICALS INC

(Check all applicable)

(Last) (First)

(Middle)

[ACHN] 3. Date of Earliest Transaction

Director Officer (give title below)

\_X\_\_ 10% Owner \_ Other (specify

C/O RA CAPITAL MANAGEMENT, LLC, 20 PARK

PLAZA, SUITE 1200 (Street)

4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

Form filed by One Reporting Person \_X\_ Form filed by More than One Reporting

Person

**BOSTON, MA 02116** 

(City)	(State)	(Zip) Tal	ble I - Non	-Derivative	Secur	ities Acquire	ed, Disposed of,	or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securitie on Disposed of (Instr. 3, 4)	f (D)	uired (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock, \$0.001 par value	08/28/2014		S	173,641 (1)	D	\$ 11.5144	15,366,014	I	See Footnotes (3) (4)
Common Stock, \$0.001 par value	08/29/2014		S	4,150 (1)	D	\$ 11.5255	15,361,864	I	See Footnotes (3) (4)
	08/29/2014		S	2,635 (1)	D		15,359,229	I	

Common Stock, \$0.001 par value					\$ 11.4211			See Footnotes (3) (4)
Common Stock, \$0.001 par value	08/29/2014	S	33,960 (1)	D	\$ 11.409	15,325,269	I	See Footnotes (3) (4)
Common Stock, \$0.001 par value	08/29/2014	S	30,500 (1)	D	\$ 11.436	15,294,769	I	See Footnotes
Common Stock, \$0.001 par value	08/29/2014	S	46,600 (1)	D	\$ 11.445	15,248,169	I	See Footnotes
Common Stock, \$0.001 par value	08/29/2014	S	217,000 (1)	D	\$ 11.4	15,031,169	I	See Footnotes (3) (4)
Common Stock, \$0.001 par value	08/29/2014	S	64,000 (1)	D	\$ 11.4134	14,967,169	I	See Footnotes (3) (4)
Common Stock, \$0.001 par value	09/02/2014	S	1,100 (1)	D	\$ 11.9318	14,966,069	I	See Footnotes (3) (4)
Common Stock, \$0.001 par value	09/02/2014	S	103,052 (1)	D	\$ 12.0064	14,863,017	I	See Footnotes (3) (4)
Common Stock, \$0.001 par value	09/02/2014	S	158,655 (1)	D	\$ 12.0382	14,704,362 ( <u>2)</u>	I	See Footnotes (3) (4)

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

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 control number.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

9. Nu Deriv Secu

Owner Follo Repo Trans (Instr

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. Transa Code (Instr.		5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amor Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)
				Code	V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
Reporting Owner Funder Funders	Director	10% Owner	Officer	Other		
RA CAPITAL MANAGEMENT, LLC C/O RA CAPITAL MANAGEMENT, LLC 20 PARK PLAZA, SUITE 1200 BOSTON, MA 02116		X				
RA Capital Healthcare Fund LP C/O RA CAPITAL MANAGEMENT, LLC 20 PARK PLAZA, SUITE 1200 BOSTON, MA 02116		X				
Kolchinsky Peter C/O RA CAPITAL MANAGEMENT, LLC 20 PARK PLAZA, SUITE 1200 BOSTON, MA 02116		X				

## **Signatures**

Peter Kolchinsky, Manager of RA Capital Management, LLC					
**Signature of Reporting Person	Date				
Peter Kolchinsky, individually	09/02/2014				
**Signature of Reporting Person	Date				
Peter Kolchinsky, Manager of RA Capital Management, LLC, the General Partner of RA Capital Healthcare Fund, L.P.	09/02/2014				
**Signature of Reporting Person	Date				

## **Explanation of Responses:**

- \* 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).
- (1) All such shares were sold by RA Capital Healthcare Fund, L.P. (the "Fund").

**(2)** 

Reporting Owners 3

Following the transactions set forth on Table I above, 11,390,517 shares are held by the Fund, and 3,313,845 shares are held in an account owned by Blackwell Partners, LLC (the "Blackwell Account").

- RA Capital Management, LLC (the "Adviser") is the general partner of the Fund and the investment adviser of the Blackwell Account.

  (3) Peter Kolchinsky is the sole manager of the Adviser. In their respective capacities, each of Mr. Kolchinsky and the Adviser may be deemed to beneficially own the reported securities.
- Pursuant to Rule 16a-1 under the Securities Exchange Act of 1934, as amended (the "Act"), each of the Reporting Persons disclaims beneficial ownership of the securities reported herein except to the extent of their respective pecuniary interests therein. The filing of this Form 4 shall not be construed as an admission that Mr. Kolchinsky or the Adviser is or was for the purposes of Section 16(a) of the Act, or otherwise, the beneficial owner of any of securities reported herein.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.