## Edgar Filing: Liotta Dennis - Form 4

Liotta Deni	nis								
Form 4									
December	20, 2010								
FOR			GEGU					т	PPROVAL
	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549				NOMB Number:	3235-0287			
Check if no lo						Expires:	January 31, 2005		
subject Section Form 4 Form 5	to SIATEN 16. or	F CHANGES IN BENEFICIAL OWNERSHIP OI SECURITIES				Estimated average burden hours per response 0			
obligat may co	ions Section 17	(a) of the l	Public U	Jtility Hol	ding Coi		nge Act of 1934, of 1935 or Sectio 940	)n	
(Print or Type	e Responses)								
1. Name and Address of Reporting Person <u>*</u> Liotta Dennis			2. Issuer Name <b>and</b> Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer			
	ACHILLION PHARMACEUTICALS INC [ACHN]				(Che X Director	ck all applicabl	all applicable) 10% Owner		
(Last)	(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)			Officer (giv below)		ner (specify
C/O ACH PHARMA GEORGE	CEUTICALS, IN	C., 300	12/16/2	-					
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEW HAY	VEN, CT 06511							More than One R	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed o	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	Transactio Code (Instr. 8)	nAcquired Disposed (Instr. 3, -	(A) or of (D) 4 and 5) (A) or	Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect
				Code V		(D) Price			
Reminder: R	eport on a separate line	e for each cl	ass of sec	urities bene	-	-	-		
					inforr requi	nation cont red to respo	spond to the colle ained in this form ond unless the for htly valid OMB co	are not m	SEC 1474 (9-02)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

number.

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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. 5. Number of TransactiorDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 1 5 ()
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 3.1	12/16/2010		А	50,000	<u>(1)</u>	12/16/2020	Common Stock	50,000	

## **Reporting Owners**

Reporting Owner Name / Address		Relationships					
1	D	irector	10% Owner	Officer	Other		
Liotta Dennis C/O ACHILLION PHARMACEUTICALS 300 GEORGE STREET NEW HAVEN, CT 06511	, INC.	Х					
Signatures							
/s/ Mary Kay Fenton, attorney-in-fact 1	2/20/2010						
**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) The option grant vests as to 25% on the date of grant and as to an additional 2.08% at the end of each monthly period thereafter.

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.

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