#### ACHILLION PHARMACEUTICALS INC

Form 4 June 11, 2014

## FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL OMB** 

3235-0287 Number:

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Check this box

Form 5 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

(Print or Type Responses)

C/O ACHILLION

**GEORGE STREET** 

(City)

1(b).

1. Name and Address of Reporting Person \*

KISHBAUCH MICHAEL D

2. Issuer Name and Ticker or Trading

Symbol

**ACHILLION** 

PHARMACEUTICALS INC

[ACHN]

(Last) (First) (Middle) 3. Date of Earliest Transaction

(Month/Day/Year) 06/10/2014

(Zip)

(Street)

(State)

Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

X\_ Director 10% Owner Officer (give title

Other (specify

4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check

Applicable Line)

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

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

NEW HAVEN, CT 06511

PHARMACEUTICALS, 300

		1 1,01 2 11,01 2 11,01 2 00 11,01 2 10 10 10 10 10 10 10 10 10 10 10 10 10								
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transactio	4. Securities Acquired on(A) or Disposed of (D)			5. Amount of Securities	6. Ownership	7. Nature of Indirect	
(Instr. 3)	•	any	Code	* / * /			Beneficially	Form: Direct	Beneficial	
		(Month/Day/Year)	(Instr. 8)	str. 8)			Owned	(D) or	Ownership	
		•					Following	Indirect (I)	(Instr. 4)	
					(A) or		Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
			Code V	Amount	(D)	Price	(Ilisti. 5 aliu 4)			
Common Stock	06/10/2014		M	371,937	A	\$ 3.1	371,937	D		
Common Stock	06/10/2014		S	371,937	D	\$ 7.75	0	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control

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number.

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

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. Transaction Code (Instr. 8)	5. Number of or Derivative Securities 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Employee Stock Option (Right to Buy)	\$ 3.1	06/10/2014		M	371,937	<u>(1)</u>	12/16/2020	Common Stock	371,93

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
			40~ 0	- aa		

Director 10% Owner Officer Other

KISHBAUCH MICHAEL D C/O ACHILLION PHARMACEUTICALS 300 GEORGE STREET NEW HAVEN, CT 06511



## **Signatures**

/s/ Mary Kay Fenton, Attorney in fact 06/11/2014

\*\*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).

This option was granted on December 16, 2010 and vested over a four year period with 25% of the shares vesting on the first anniversary of the date of grant and an additional 6.25% vesting at the end of each three-month period thereafter through September 18, 2013, Mr. Kishbauch's last day of employment with the Company.

#### **Remarks:**

The transactions reported on this Form 4 were executed pursuant to a Rule 10b5-1 trading plan adopted by Mr. Kishbauch on Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

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