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Form 4	ON PHARMACEU	JTICALS INC							
Check to subject Section	M 4 UNITED this box nger to STATEM 16.	STATES SEC V MENT OF CHA	Vashington	n, D.C. 20	OMB Number: Expires: Estimated burden hou	irs per			
Form 5 obligati may co	Filed put	rsuant to Section (a) of the Public 30(h) of the	Utility Ho	olding Con	npany	Act of 1		response	0.5
(Print or Type	e Responses)								
	Address of Reporting FAL MANAGEM	ENT, Symbo ACH	ol ILLION RMACEU	nd Ticker or TICALS I		-8	. Relationship of l ssuer (Check Director	Reporting Per	e)
	. , , .	(Mont 10/14	e of Earliest h/Day/Year) 4/2013	Transaction		b	Officer (give t elow)	itle _X_ Oth below) potnotes (1)-(9	ner (specify
BOSTON,	(Street) MA 02116		amendment, I Month/Day/Ye	Date Original car)	l	A 	. Individual or Joi pplicable Line) Form filed by Or X_ Form filed by M	ne Reporting Pe	rson
(City)	(State)	(Zip) T	able I - Non	-Derivative	Securi		erson red. Disposed of.	or Beneficia	llv Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transacti Code) (Instr. 8)	Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)			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	10/14/2013		Р	81,200 (1)	A	\$ 2.755	16,986,971	Ι	See Footnotes (10) (11)
Common Stock, \$0.001 par value	10/14/2013		Р	13,200 (2)	A	\$ 2.765	17,000,171	I	See Footnotes (10) (11)
	10/14/2013		Р		А		17,475,870	Ι	

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Common Stock, \$0.001 par value			475,699 (<u>3)</u>		\$ 2.7718			See Footnotes (10) (11)
Common Stock, \$0.001 par value	10/14/2013	Р	230,100 (4)	A	\$ 2.775	17,705,970	I	See Footnotes (10) (11)
Common Stock, \$0.001 par value	10/14/2013	Р	950,000 (5)	A	\$ 2.7895	18,655,970	I	See Footnotes (10) (11)
Common Stock, \$0.001 par value	10/14/2013	Р	206,000 (<u>6)</u>	A	\$ 2.8	18,861,970	I	See Footnotes (10) (11)
Common Stock, \$0.001 par value	10/14/2013	Р	369,900 (7)	A	\$ 2.8352	19,231,870	I	See Footnotes (10) (11)
Common Stock, \$0.001 par value	10/14/2013	Р	43,130 (<u>8)</u>	A	\$ 2.854	19,275,000 (9)	I	See Footnotes (10) (11)

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 (9-02) required to respond unless the form displays a currently valid OMB control 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)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address							
	Director	10% Owner	Officer	Other			
RA CAPITAL MANAGEMENT, LLC C/O RA CAPITAL MANAGEMENT, LLC 20 PARK PLAZA, SUITE 1200 BOSTON, MA 02116		Х		See Footnotes (1)-(9)			
Kolchinsky Peter C/O RA CAPITAL MANAGEMENT, LLC 20 PARK PLAZA, SUITE 1200 BOSTON, MA 02116		Х		See Footnotes (1)-(9)			
RA Capital Healthcare Fund LP C/O RA CAPITAL MANAGEMENT, LLC 20 PARK PLAZA, SUITE 1200 BOSTON, MA 02116		Х		See Footnotes (1)-(9)			
Signatures							
/s/ Peter Kolchinsky, Manager of RA Capital Management, LLC							
**Signature of Reporting Person							
/s/ Peter Kolchinsky, individually							
**Signature of Reporting Person							
/s/ Peter Kolchinsky, Manager of RA Capital Management, LLC, the General Partner of RA Capital Healthcare Fund, L.P.							
<u>**</u> Signature of	Reporting Po	erson			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 securities purchased include 63,743 shares for RA Capital Healthcare Fund, L.P. (the "Fund") and 17,457 shares for an account owned by Blackwell Partners, LLC (the "Blackwell Account").
- (2) The securities purchased include 10,363 shares for the Fund and 2,837 shares for the Blackwell Account.
- (3) The securities purchased include 373,424 shares for the Fund and 102,275 shares for the Blackwell Account.
- (4) The securities purchased include 180,633 shares for the Fund and 49,467 shares for the Blackwell Account.
- (5) The securities purchased include 745,752 shares for the Fund and 204,248 shares for the Blackwell Account.
- (6) The securities purchased include 161,713 shares for the Fund and 44,287 shares for the Blackwell Account.
- (7) The securities purchased include 290,373 shares for the Fund and 79,527 shares for the Blackwell Account.
- (8) The securities purchased include 33,844 shares for the Fund and 9,286 shares for the Blackwell Account.
- (9) Following the transactions set forth on Table I above, 14,899,145 shares are held by the Fund, and 4,375,855 shares are held in the Blackwell Account.
- RA Capital Management, LLC (the "Adviser") is the general partner of the Fund and the investment adviser of the Blackwell Account.(10) 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.

(11)

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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.