### Edgar Filing: BLANK BURKHARD - Form 3

#### **BLANK BURKHARD**

Form 3 June 09, 2006

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3 Washington, D.C. 20549

#### **OMB APPROVAL**

**OMB** Number:

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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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**SECURITIES** 

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person \*

BLANK BURKHARD

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

06/08/2006

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

C/O ALTUS

**PHARMACEUTICALS** 

INC., 125 SIDNEY STREET

(Street)

Altus Pharmaceuticals Inc. [ALTU]

4. Relationship of Reporting Person(s) to Issuer

Filed(Month/Day/Year)

(Check all applicable)

(give title below) (specify below)

Director \_X\_\_ Officer

10% Owner Other

6. Individual or Joint/Group Filing(Check Applicable Line) SVP, Med., Reg Aff. & Proj Mgt \_X\_ Form filed by One Reporting

Person

Form filed by More than One

5. If Amendment, Date Original

Reporting Person

CAMBRIDGE. MAÂ 02139

(City) (State) (Zip)

1. Title of Security (Instr. 4)

2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership

**Table I - Non-Derivative Securities Beneficially Owned** 

4. Nature of Indirect Beneficial Ownership

(Instr. 5) Form: Direct (D)

or Indirect (I) (Instr. 5)

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

Date

Exercisable

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** 

5. 4 Ownership Conversion or Exercise Form of

6. Nature of Indirect Beneficial Ownership (Instr. 5)

(Instr. 4)

**Expiration Title** Date

Amount or Number of

Derivative Price of Derivative Security: Security Direct (D)

1

### Edgar Filing: BLANK BURKHARD - Form 3

Shares

or Indirect (I)

(Instr. 5)

Other

### **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer

BLANK BURKHARD C/O ALTUS PHARMACEUTICALS INC. 125 SIDNEY STREET CAMBRIDGE, MAÂ 02139

Â SVP, Med., Reg Aff. & Proj Mgt

# **Signatures**

/s/ Burkhard Blank

\*\*Signature of Date
Reporting Person

# **Explanation of Responses:**

No securities are beneficially owned

\* If the form is filed by more than one reporting person, see Instruction 5(b)(v).

06/09/2006

\*\* 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. 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.

Reporting Owners 2