Edgar Filing: VERTEX PHARMACEUTICALS INC / MA - Form 4

VERTEX PH Form 4 May 08, 200'	IARMACEUTI 7	ICALS ING	C/MA									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
	UNITEI				NGE C	COMMISSION	OMB Number:	3235-0287				
Check th if no long subject to Section 1	state	Washington, D.C. 20549 x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES								Expires: January 31, 2005 Estimated average		
Form 4 or Form 5 obligatior may conti <i>See</i> Instru 1(b).	Filed pu ¹⁸ Section 17 inue.	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										
(Print or Type R	Responses)											
1. Name and Address of Reporting Person <u>*</u> BOGER KENNETH S			2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(1 4)	(First)	(M: 141-)	INC / MA [VRTX]									
(Last) C/O VERTE PHARMAC INCORPOR STREET		(Middle) AVERLY	3. Date of (Month/D 05/07/20	-	ansaction			Director X Officer (give below) SVP &		er (specify		
	(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 Form filed by More than One Reporting 					
CAMBRIDO	GE, MA 02139							Person	fore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecuri	ties Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executio any	med on Date, if Day/Year)	3. Transactio Code (Instr. 8)	4. Securiti n(A) or Dis (Instr. 3, 4	sposed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	05/07/2007			Code V S(1)	Amount 12,684	(D) D	Price \$ 30.6	(Instr. 3 and 4) 103,677	D			
Common Stock								1,000	I	Held by minor children		
Common Stock								4,271	Ι	401(k)		

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 number.

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

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		onNumber	Expiration D		Amou		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired				· · · · ·		Follo
	~~~~,				(A) or						Repo
					Disposed						Trans
											(Instr
					of (D)						(IIISU
					(Instr. 3,						
					4, and 5)						
						Date Exercisable	Expiration Date	Title	Amount or Number of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships						
FB	F		10% Owner	Officer	Other			
BOGER KENNETH S C/O VERTEX PHARMAC 130 WAVERLY STREET CAMBRIDGE, MA 02139	EUTICALS INCORPORATED			SVP & General Counsel				
Signatures								
Kenneth S. Boger	05/08/2007							
<u>**</u> Signature of	Date							

Reporting Person **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) Transaction made pursuant to Mr. Boger's company approved trading plan established under rule 10b5-1.

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.