Edgar Filing: VERTEX PHARMACEUTICALS INC / MA - Form 4 VERTEX PHARMACEUTICALS INC / MA Form 4 September 20, 2006 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB Washington, D.C. 20549 Number: Check this box Expires: if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading BOGER JOSHUA S Issuer Symbol VERTEX PHARMACEUTICALS (Check all applicable) INC / MA [VRTX] 10% Owner (Last) (First) (Middle) 3. Date of Earliest Transaction \_X\_ Director X\_Officer (give title Other (specify (Month/Day/Year) below) below) C/O VERTEX 09/19/2006 President & CEO PHARMACEUTICALS **INCORPORATED, 130 WAVERLY** STREET (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting CAMBRIDGE, MA 02139 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of 6. Transaction(A) or Disposed of (D) (Month/Day/Year) Ownership Security Execution Date, if Securities (Instr. 3) Code (Instr. 3, 4 and 5) Beneficially Form: Direct anv (Month/Day/Year) (Instr. 8) Owned (D) or Following Indirect (I) Reported (Instr. 4) (A) Transaction(s) or (Instr. 3 and 4) (D) Price Code V Amount Common \$ 09/19/2006 11,000 1,046,403 D Μ Α Stock 15.56 Common S<sup>(1)</sup> 09/19/2006 11.000 D 1,035,403 D 32.47 Stock Common 207,500 Ι Stock

Common

Stock

I 15,979 401(k)

7. Nature of

Indirect

Beneficial

(Instr. 4)

Ownership

shares in

trust (2)

3235-0287

January 31,

2005

0.5

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

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## 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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and 4	ecurities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Stock Option	\$ 15.56	09/19/2006		М	11,000	03/12/1997(3)	12/11/2006	Common Stock	11,000

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
BOGER JOSHUA S C/O VERTEX PHARMACEUTICALS INCORPORATED 130 WAVERLY STREET CAMBRIDGE, MA 02139	Х		President & CEO			
Cianaturaa						

## Signatures

Valerie L. Andrews,	09/20/2006		
Attorney-In-Fact	07/20/2000		
**Signature of Reporting Person	Date		

\*\*Signature of Reporting Person Date: Date

- \* 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 Dr. Boger's company approved trading plan established under Rule 10b5-1.
- (2) Shares held in trust for Dr. Boger's children. Dr. Boger disclaims beneficial ownership of such shares.
- (3) Right to buy under 1994 Stock and Option Plan, vesting quarterly over 5 years from 12/12/1996.

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.