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VERTEX PH Form 4 July 23, 2008	HARMACEUT	TICALS IN	C/MA									
FORN Check thi if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	is box ger STATI 6. r Filed p ns Section 1	Washington, D.C. 20549 x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 20(b) of the Investment Company Act of 1940								PROVAL 3235-0287 January 31, 2005 verage rs per 0.5		
(Print or Type I	Responses)											
1. Name and Address of Reporting Person <u>*</u> Graves Kurt			2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED, 130 WAVERLY STREET			3. Date of Earliest Transaction (Month/Day/Year) 07/21/2008					Director 10% Owner Officer (give title Other (specify below) below) EVP, Chief Commercial Officer				
				ndment, Da hth/Day/Year)	-	1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	med m Date, if Day/Year)	3. Transactio Code (Instr. 8)	4. Securi n(A) or Di (Instr. 3,	(A) or	d of (D)	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	07/21/2008			Code V S(1)	Amount 600	(D) D	Price \$ 31.89	58,974	D			
Common Stock	07/21/2008			S <u>(1)</u>	2,325	D	\$ 32.71 (2) (3)	56,649	D			

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

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information contained in this form are not
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(9-02)

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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. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/ e s	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and unt of rlying rities . 3 and 4)	Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
Repo	rting O	wners	Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owner Name / AddressDirector10% OwnerOfficerOtherGraves Kurt
C/O VERTEX PHARMACEUTICALS
INCORPORATED
130 WAVERLY STREET
CAMBRIDGE, MA 02139EVP, Chief Commercial
OfficerEVP, Chief Commercial
OfficerSignatures

Valerie L. Andrews, Attorney-In-Fact 07/23/2008

**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).
- (1) Transaction made pursuant to Mr. Graves' company approved trading plan under Rule 10b5-1.
- (2) Open market sales reported on this line occurred at a weighted average price of \$32.71 (range \$32.54 to \$32.94).
- (3) Mr. Graves undertakes to provide (upon request by the SEC staff, the issuer or a security holder of the issuer) full information regarding the number of shares sold at each separate price.

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.