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VERTEX PH Form 4 June 09, 200	HARMACEUTIC	ALS INC	/ MA								
	ГЛ								OMB AF	PROVAL	
FORM	UNITED	STATES		ITIES A hington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or			' CHAN	GES IN SECUR	Expires: January 31 2009 Estimated average burden hours per response 0.9						
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17(a	a) of the P	ublic Ut		ling Con	npany	y Act of	e Act of 1934, 71935 or Section 40		0.0	
(Print or Type F	Responses)										
Graves Kurt Symbol				Name and X PHAR	MACEU			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(-)				IA [VRT]	-						
(Last) C/O VERTE PHARMAC INCORPOR STREET	EX		3. Date of (Month/D 06/05/20		ansaction			Director X Officer (give below) EVP, Chief		Owner er (specify Officer	
511021	(Street)	(Street) 4. If Amer Filed(Mon				1		 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
CAMBRID	GE, MA 02139							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	4. Securi on(A) or D (Instr. 3,	ispose	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)		
Common Stock	06/05/2008			S <u>(1)</u>	3,549	D	\$ 31.05	59,574	D		

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. Titl Deriv Secur (Instr.	vative rity	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Titl Amou Under Secur (Instr.	int 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		Relationships						
L O		Director	10% Owner	Officer	Other			
Graves Kurt C/O VERTEX PHARMACEUTICALS INCORPORATED 130 WAVERLY STREET CAMBRIDGE, MA 02139				EVP, Chief Commercial Officer				
Signatures								
Valerie L. Andrews, Attorney-In-Fact	06/09/2008							
**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. Grave'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.