## Edgar Filing: VERTEX PHARMACEUTICALS INC / MA - Form 4

VERTEX P Form 4 June 04, 20	PHARMACEUTIC	CALS INC	C/MA								
FORM	<b>14</b> UNITED	STATES	5 SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549				OMB APPROVAL OMB 3235-0 Number:				
Check ti if no lor subject Section Form 4 Form 5 obligation may con <i>See</i> Inst 1(b).	this box nger to 16. or 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							Expires: Estimated burden hou response	urs per		
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> MCGLYNN MARGARET G			2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	. ,	Middle)		of Earliest T Day/Year) 2013	ransaction		X Director Officer (give below)		% Owner her (specify		
CAMDDIE				4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
	OGE, MA 02139	(7:)					Person				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed				-				
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	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)		
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned directly	or indirectly.				
					Perso inform requir	ns who re nation cor red to resp	espond to the collect ntained in this form pond unless the for ently valid OMB col	are not m	SEC 1474 (9-02)		

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

number.

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 Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Stock Option	\$ 81.54	06/01/2013		А	20,000	06/01/2013 <u>(1)</u>	05/31/2023	Common Stock	20,000
Poparting Owners									

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## **Reporting Owners**

Reporting Owner Name / Address			Relationships					
	Director	10% Owner	Officer	Other				
MCGLYNN MARGARET G C/O VERTEX PHARMACEUTICALS INCORPORATED 130 WAVERLY ST. CAMBRIDGE, MA 02139								
Signatures								
Valerie L. Andrews, Attorney-In-Fact	06/04/2013							
****	_							

\*\*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) Fully vested.

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.