Edgar Filing: BOGER JOSHUA S - Form 4

BOGER JOS Form 4	SHUA S										
November 03	3, 2011										
FORM	14								OMB A	PPROVAL	
	UNITEL) STATES		XITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 1 Form 4 or Form 5 obligation may cont See Instru	GES IN BENEFICIAL OWNERSHIP (SECURITIES 6(a) of the Securities Exchange Act of 193 illity Holding Company Act of 1935 or Sec vestment Company Act of 1940					Expires:January 312005Estimated averageburden hours perresponse0.5					
1(b). (Print or Type F	Responses)										
1. Name and Address of Reporting Person * 2. Issu BOGER JOSHUA S Symbol VERT				er Name and Ticker or Trading EX PHARMACEUTICALS MA [VRTX]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O VERTE PHARMAC INCORPOR ST		(Middle)	3. Date of (Month/D 11/02/20	-	ansaction			X Director Officer (give below)	title 10% below)	Owner er (specify	
(Street) 4. If Amer Filed(Mont								 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							Person		porting	
(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 Da (Month/Day/Year	ransaction Date 2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securi on(A) or Di (Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)		
Common Stock	11/02/2011			M	4,000	A	\$ 24.66	731,395	D		
Common Stock	11/02/2011			S <u>(1)</u>	3,100	D	\$ 37.06 (2) (3)	730,995	D		
Common Stock	11/02/2011			S <u>(1)</u>	900	D	\$ 37.78 (3) (4)	728,695	D		

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Common Stock	13,286	I 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 information contained in this form are not 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 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 on f Derivative 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 of Underlying Securities (Instr. 3 and 4)		8. H Der Sec (In:
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 24.66	11/02/2011		М	4,000	(5)	12/10/2011	Common Stock	4,000	

Reporting Owners

Reporting Owner Name / Address		Relationships					
			10% Owner	Officer	Other		
BOGER JOSHUA S C/O VERTEX PHARMACEUTICAL 130 WAVERLY ST CAMBRIDGE, MA 02139	S INCORPORATED	Х					
Signatures							
Omar White, Attorney-In-Fact	1/03/2011						

**Signature of 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 Dr. Boger's company approved trading plan under Rule 10b5-1.

Date

(2) Open market sales reported on this line occurred at a weighted average price of \$37.06 (range \$36.55 to \$37.52).

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- (3) Dr. Boger 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.
- (4) Open market sales reported on this line occurred at a weighted average price of \$37.78 (range \$37.55 to \$38.26).
- (5) 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.