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VERTEX PHARMACEUTICALS INC / MA

Form 4

October 29, 2013

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number:

3235-0287 January 31,

Expires: 2005

OMB APPROVAL

Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

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

30(h) of the Investment Company Act of 1940

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

Silva Paul M

(Last)

(City)

VERTEX PHARMACEUTICALS

(Check all applicable)

INC / MA [VRTX] (First)

(Middle)

(Zin)

3. Date of Earliest Transaction

10% Owner Director X_ Officer (give title Other (specify

SVP & Corp Controller

(Month/Day/Year) 10/25/2013

below)

C/O VERTEX **PHARMACEUTICALS** INCORPORATED, 130 WAVERLY

(Street)

(State)

ST.

4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

CAMBRIDGE, MA 02139

(City)	(State)	Table Table	e I - Non-D	erivative	Secur	rities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi on(A) or D (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 Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	10/25/2013		M	1,125	A	\$ 48.74	12,875	D	
Common Stock	10/25/2013		S <u>(1)</u>	1,025	D	\$ 76.56 (2) (3)	11,850	D	
Common Stock	10/25/2013		S <u>(1)</u>	100	D	\$ 78.29	11,750	D	
Common							169	I	401(k)

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Stock

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

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SEC 1474 (9-02)

> Sec (In

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 proof Derivati Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	ve Expi (Mo	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)		e rcisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 48.74	10/25/2013		M	1,12	.5	<u>(4)</u>	07/24/2022	Common Stock	1,125

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Silva Paul M C/O VERTEX PHARMACEUTICALS INCORPORATED 130 WAVERLY ST. CAMBRIDGE, MA 02139

SVP & Corp Controller

Signatures

Kenneth L. Horton, Attorney-In-Fact

**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. Silva's company approved trading plan under Rule 10b5-1.
- (2) Open market sales reported on this line occurred at a weighted average price of \$76.56 (range \$76.22 to \$76.97).

Reporting Owners 2

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- (3) Mr. Silva 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) The option vests in 16 quarterly installments from 07/25/2012.

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.