Edgar Filing: VERTEX PHARMACEUTICALS INC / MA - Form 4

VERTEX PHARMACEUTICALS INC / MA

Form 4

Common

Stock

November 16, 2006

FORM 4 UNITED STATES SECURIFIES AND EVOLANCE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box								Expires:	January 31,		
if no longer subject to Section 16. Form 4 or STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Estimated average burden hours per response 0.5			
Form 5 obligations may continue. See Instruction 1(b). 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											
(Print or Type F	Responses)										
1. Name and A ALAM JOH	Person * 2. Issue: Symbol	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer					
			X PHAR IA [VRT]		JTIC.	ALS	(Check all applicable)				
(Last)	fiddle) 3. Date of (Month/E	f Earliest Tr Oay/Year)	ansaction				X Officer (give title Other (specify				
C/O VERTEX 11/15/2006 EVP, Med. Dev. Group & CMO PHARMACEUTICALS INCORPORATED, 130 WAVERLY STREET									СМО		
	(Street)		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				
CAMBRIDO	GE, MA 01239						Form filed by M Person				
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								ly Owned		
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if			4. Securi on(A) or D (Instr. 3,	ispose	ed of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Stock	11/15/2006		M	1,500	A	\$ 18.47	106,063	D			
Common Stock	11/15/2006		S <u>(1)</u>	1,500	D	\$ 43.55	104,563	D			
Common Stock	11/15/2006		S(1)	707	D	\$ 44.01	103,856	D			
C											

401(k)

I

6,265

Edgar Filing: VERTEX PHARMACEUTICALS INC / MA - Form 4

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.

SEC 1474 (9-02)

Other

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Number		6. Date Exercisable and		7. Title and Amount of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction Derivative		Expiration Date		Underlying Securities	
Security	or Exercise		any	Code Securities		(Month/Day/Year)		(Instr. 3 and 4)	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Acquired					
	Derivative				(A) or				
	Security				Disposed of				
				(D)					
				(Instr. 3, 4,					
					and 5)				
									Amount
									or
						Date Exercisable	Expiration	Title	Number
						Date Entresacte	Date	11010	of
				Code V	(A) (D)				Shares
					()				
Stock	\$ 18.47	11/15/2006		M	1 500	12/26/1997(2)	00/25/2007	Common	1.500
Option	Ф 10.47	11/13/2000		M	1,300	12/20/1997	0912312001	Stock	1,500
1									

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer

ALAM JOHN J C/O VERTEX PHARMACEUTICALS INCORPORATED 130 WAVERLY STREET CAMBRIDGE, MA 01239

EVP, Med. Dev. Group &

CMO

Signatures

Valerie L. Andrews, 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 Dr. Alam's company approved trading plan established under Rule 10b5-1.
- (2) Right to buy under 1996 Stock and Option Plan, vesting quarterly over 5 years from 9/26/1997.

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.

Reporting Owners 2