FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APE | PROVAL |
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| OMB Number: | 3235-028 |
| F-4141 | hurdon |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

87 Estimated average burden hours per response: 0.5

| | | | | | or S | ection | 1 30(n) | or the | investme | nt Co | mpany Act | 01 1940 | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|------------|----------------------------------|----------|--------------------------------------------------------------------------|--------|---------------------------------------------------------|---------------------------------------|-------------------------------------|-----------------------------------------------------------------|----------------------------------|----------------------------------------------------------|-----------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|--------------------|-----------------------------------------------------|--|
| 1. Name and Address of Reporting Person* SANDERS CHARLES A | | | | | 2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| SAND | EKS CH | AKLES A | | | MA | ΛſV | RTX | 1 | | | | | | | V Director | r | | 10% Ov | vner | |
| (Last) | (F | irst) | (Middle) | | | | | | | | | | | | Officer below) | (give title | | Other (s below) | specify | |
| C/O VERTEX PHARMACEUTICALS INCORPORATED | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/01/2004 | | | | | | | | | | | | | | | |
| 130 WAVERLY STREET | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | | | | | | | | | | | | | | | , | led by One | Repo | orting Persor | า | |
| CAMBR | IDGE M | IΑ | 02139 | | | | | | | | | | | | Form fi Person | | e than | One Repor | ting | |
| (City) | (S | State) | (Zip) | | | | | | | | | | | | | | | | | |
| | | Tab | le I - Nor | n-Deriva | tive | Secu | uritie | s Ac | quired | , Dis | posed o | f, or E | Bene | ficiall | y Owned | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date (Month/ | | | | | /Day/Year) if | | 2A. Deemed Execution Date if any (Month/Day/Ye | | r, Transaction D Code (Instr. 5) | | Disposed | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | 5. Amou Securitie Beneficia Owned F | s ally following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | Code V A | | (A) or (D) | | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| | | - | Table II - I | | | | | | | | osed of, convertil | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security Security 3. Transaction Date Execution Diff any (Month/Day/Year) | | | Date, Transaction Code (Instr | | tion istr. | | | 6. Date Ex Expiration (Month/Da | | 7. Title Amoun Securit Underly Derivat (Instr. 3 | nt of ties ying tive So | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | re es ally ng d tion(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | Co | ode V | , | (A) | | Date Exercisab | | Expiration Date | Title | 0 N 0 | lumber | | | | | | |
| Stock | \$9.09 | 06/01/2004 | | | Δ | | 7 500 | | 06/01/200 | 4(1) | 05/31/2014 | Commo | on , | 7 500 | \$0 | 90.000 | 0 | D | | |

Explanation of Responses:

1. Right to buy under 1996 Stock and Option Plan. Fully vested.

Remarks:

Kenneth S. Boger, Attorney-In-

06/02/2004

Fact

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.