# SEC Form 4

## FORM 4

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

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* | 2. Issuer Name **and** Ticker or Trading Symbol | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |
|---|---|---|
| COLLINSON STUART J | VERTEX PHARMACEUTICALS INC / MA [ VRTX ] | X Director    10% Owner |
| (Last) (First) (Middle) | | Officer (give title below)    Other (specify below) |
| C/O VERTEX PHARMACEUTICALS INCORPORATED | 3. Date of Earliest Transaction (Month/Day/Year) 12/14/2006 | |
| 130 WAVERLY STREET | | |
| (Street) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) |
| CAMBRIDGE MA 02139 | | X Form filed by One Reporting Person |
| (City) (State) (Zip) | | Form filed by More than One Reporting Person |

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially 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. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 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) |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | Code | V | Amount | (A) or (D) | Price | | | |
| Common Stock | 12/14/2006 | | M | | 49,599 | A | $18.25 | 52,878 | D | |
| Common Stock | 12/14/2006 | | M | | 420 | A | $9.68 | 53,298 | D | |
| Common Stock | 12/14/2006 | | S[(1)] | | 50,019 | D | $37.81 | 3,279 | D | |

## 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. Transaction Code (Instr. 8) | | 5. Number of 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 Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Stock Option | $18.25 | 12/14/2006 | | M | | | 49,599 | 12/07/1999[(2)] | 12/06/2009 | Common Stock | 49,599 | $0 | 165,524 | D | |
| Stock Option | $9.68 | 12/14/2006 | | M | | | 420 | 04/29/1999[(3)] | 04/28/2009 | Common Stock | 420 | $0 | 165,104 | D | |

**Explanation of Responses:**

1. Transaction made pursuant to Dr. Collinson's company approved trading plan established under Rule 10b5-1.

2. Right to buy under the 1996 Stock and Option Plan, fully vested as of 12/7/1999.

3. Right to buy under the 1996 Stock and Option Plan, fully vested as of 4/29/1999.

**Remarks:**

| Valerie L. Andrews, Attorney-In-Fact | 12/15/2006 |
|---|---|
| ** 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.**