FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 

OMB Number: 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. See Instruction 1(b).

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*  BOGER JOSHUA S						2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner     Officer (give title Other (specify below) below)					
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 08/05/2009								'	below)			Delow)	
130 WAVERLY STREET						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) CAMBRIDGE MA 02139				_	X Form filed by One Reporting Person Form filed by More than One Reporting Person														
(City) (State) (Zip)																			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Exec if any	Deemed cution Date, ly nth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (AD Disposed Of (D) (Instr. 3			S B	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	т	teporte ransac Instr. 3	tion(s)			(Instr. 4)
Common Stock 08/05/200					2009	09		М		6,400	A	\$13.11	1,072		2,795		D		
Common Stock 08/05/20					2009	09		<b>S</b> <sup>(1)</sup>		6,400	D	<b>\$37.11</b> <sup>(2)</sup>	2)(3) 1,06		56,395		D		
Common Stock															13	,286		I	401(k)
Common Stock														207,500				Shares in trust <sup>(4)</sup>	
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)	Execut if any	A. Deemed kecution Date, any Ionth/Day/Year)		action Instr.			6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)				9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						
Stock Options	\$13.11	08/05/2009			M			6,400	(5)	)	12/01/2009	Common	6,400	\$0		102,374		D	

## **Explanation of Responses:**

- 1. Transaction made pursuant to Dr. Boger's company approved trading plan established under Rule 10b5-1.
- $2. Open \ market \ sales \ reported \ on \ this \ line \ occurred \ at \ a \ weighted \ average \ price \ of \$37.11 \ (range \$36.78 \ to \$37.55).$
- 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. Shares held in trust for Dr. Boger's children. Dr. Boger disclaims beneficial ownership of such shares.
- 5. Fully vested.

## Remarks:

Valerie L. Andrews, Attorney-

08/06/2009

In-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.