FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| iiington, D.C. 20049 | OMB APPROVAL |
|----------------------|--------------|
|                      |              |
|                      |              |

| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| 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

|   |  |  |   |  |   | . ,     |  |                  |  | <u> </u>           |   |                                    |   |   |  |   |  |                                       |
|---|--|--|---|--|---|---------|--|------------------|--|--------------------|---|------------------------------------|---|---|--|---|--|---------------------------------------|
| 1. Name and Address of Reporting Person*  MUELLER PETER |  |  |   | 2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / |   |         |  |                  |  |                    |   |                                    | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |   |  |   |  |                                       |
| MUEL  | LEK PE   | <u>IEK</u>                                 |   | 1-   |   |         |  |                  |  | 101120             | 11.07   |                                    |   | Directo   | r  |   | 10% Ow   | ner                                   |
| (Lact)  | /[   | Firet)                                     | (Middle)  | <u>n</u>   | MA [ VRTX ]   |         |  |                  |  |                    |   |                                    | X   | Officer below)                                      | (give title  |   | Other (specify below)  |                                       |
| (Last) (First) (Middle)                                 |  |  |   |  | 3. Date of Earliest Transaction (Month/Day/Year)      |         |  |                  |  |                    |   |                                    | CSO & SVP Drug Discovery  |   |  |   |  |                                       |
| C/O VERTEX PHARMACEUTICALS INCORPORATED                 |  |  |   |  | 07/20/2005  |         |  |                  |  |                    |   |                                    |   |   |  |   |  |                                       |
| 130 WAVERLY STREET                                      |  |  |   | 4.   | If Amendment, Date of Original Filed (Month/Day/Year) |         |  |                  |  |                    |   |                                    | 6. Individual or Joint/Group Filing (Check Applicable Line)             |   |  |   |  |                                       |
| (Street)  |  |  |   |  |   |         |  |                  |  |                    |   |                                    | X   | Form fi   | led hy One   | Reno  | rting Persor   |                                       |
| CAMBR   | IDGE N   | 1A   | 02139   |  |   |         |  |                  |  |                    |   |                                    |   |   | •  | •   | One Repor  | - 1                                   |
|   |  |  |   |  |   |         |  |                  |  |                    |   |                                    |   | Person  |  | e man   | One Repor  | .irig                                 |
| (City)  | (5   | State)                                     | (Zip)   |  |   |         |  |                  |  |                    |   |                                    |   |   |  |   |  |                                       |
|   |  | Tal  | ble I - Non-  | -Derivati  | ve Se   | curitie | s Ac   | quired           | , Dis  | posed o            | f, or Be  | nefi                               | cially  | Owned   |  |   |  |                                       |
| Date  |  |  | 2. Transaction<br>Date<br>(Month/Day/                       | Execution Date   |   | Date,   | 3.<br>Transaction<br>Code (Instr. 5) 4. Securiti<br>Disposed<br>5) |                  |  |                    |   | l and Securiti<br>Benefic<br>Owned |   | es For<br>ally (D)<br>Following (I) (               |  | : Direct   I<br>· Indirect   I<br>str. 4)   ( | 7. Nature of Indirect Beneficial Ownership                               |                                       |
|   |  |  |   |  |   |         | Code   | v                | Amount   | (A) (D)            | r P   | rice                               | Reported<br>Transact<br>(Instr. 3 a                                     | ion(s)  |  | [   | Instr. 4)  |                                       |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |   |  |   |         |  |                  |  |                    |   |                                    |   |   |  |   |  |                                       |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)     | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | Code   | Transaction<br>Code (Instr.                           |         | of   |                  | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and Amou<br>of Securities<br>Underlying<br>Derivative Securi<br>(Instr. 3 and 4) |                                    |   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Numbe<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | i<br>S<br>Illy                                | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |
|   |  |  |   | Code   | v   | (A)     |  | Date<br>Exercisa |  | Expiration<br>Date | Title   | or<br>Nu<br>of                     | ount<br>nber<br>ires  |   |  |   |  |                                       |
| Stock<br>Option   | \$17.16  | 07/20/2005                                 |   | A  | İ   | 18,000  |  | 10/20/20         | )5 <sup>(1)</sup>  | 07/19/2015         | Commor<br>Stock   | 18                                 | ,000  | \$0   | 300,80   | 00  | D  |                                       |

## Explanation of Responses:

1. Right to buy under 1996 Stock and Option Plan, vesting in 16 equal quarterly installments from 07/20/2005.

## Remarks:

Valerie L. Andrews, Attorney-

07/22/2005

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.