### MCGLYNN MARGARET G

Form 4 June 05, 2018

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

OMB 3235-0287 Number:

January 31,

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Section 16. Form 4 or Form 5 obligations

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if no longer

subject to

may continue.

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

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* MCGLYNN MARGARET G

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to

Issuer

Symbol

VERTEX PHARMACEUTICALS INC / MA [VRTX]

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)

06/01/2018

X\_ Director Officer (give title below)

10% Owner Other (specify

C/O VERTEX

**PHARMACEUTICALS INCORPORATED, 50 NORTHERN AVENUE** 

(Street)

(State)

06/01/2018

06/01/2018

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

BOSTON, MA 02210

(City)

1. Title of 2. Transaction Date 2A. Deemed 3. Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

(Zip)

4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

Amount of Securities Beneficially (D) or Owned Following (Instr. 4) Reported

Transaction(s)

(Instr. 3 and 4)

6. Ownership 7. Nature of Form: Direct Indirect Beneficial Indirect (I) Ownership (Instr. 4)

or V Amount (D) Price

2,188

(A)

D

Code 1,801

D

A (1) A \$0 8,113

(2)

D

D

Common Stock

Stock

Common

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

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5,925

SEC 1474 (9-02)

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# 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. Transactic Code (Instr. 8)	5. Number proof 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 152.74	06/01/2018		A	3,229	(3)	05/31/2028	Common Stock	3,229
Deferred Stock Units	<u>(4)</u>	06/01/2018		A	2,188	<u>(4)</u>	<u>(4)</u>	Common Stock	2,188

# **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

MCGLYNN MARGARET G C/O VERTEX PHARMACEUTICALS INCORPORATED 50 NORTHERN AVENUE BOSTON, MA 02210



## **Signatures**

/s/ Stephen Migausky, Attorney-in-Fact

06/05/2018

\*\*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) Restricted stock unit that vests, subject to certain limited exceptions, on the first anniversary of the grant date.
- Upon the vesting of restricted stock units granted to Ms. McGlynn on June 1, 2017, Ms. McGlynn deferred the receipt of 2,188 shares of common stock and received instead 2,188 deferred stock units pursuant to the Company's deferred compensation plan. As a result, Ms. McGlynn is reporting the disposition of 2,188 shares of common stock in exchange for an equal number of deferred stock units.
- (3) Fully vested.

Reporting Owners 2

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Each deferred stock unit represents one share of common stock and is paid out in common stock upon the earliest to occur of (i)

(4) termination of Ms. McGlynn's service on our board of directors, (ii) a change of control of our company and (iii) Ms. McGlynn's disability or death.

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.