BOSTON SCIENTIFIC CORP

Form 4 February 27, 2003 SEC Form 4

FORM 4		TATES SECU IANGE COM	URITIES AND MISSION	OMB APPROVAL	
[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	Washington, D STATEMEN BENEFICIA Filed pursuant t Exchange Act o Utility Holding Compa	T OF CHANGE L OWNERSHIP to Section 16(a) of 1934, Section 176 any Act of 1935 or	ES IN P the Securities	OMB Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per response 0.5	
Investment 1. Name and Address of Reporting Person* Fox, Marye Anne (Last) (First) (Middle) One Boston Scientific Place (Street) Natick, MA 01760-1537 (City) (State) (Zip) USA		Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol Boston Scientific Corporation (BSX) 3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary) 4. Statement for (Month/Day/Y) 5. If Amendment Date of Origina (Month/Year)		(Check all applicable)	
	ransaction Date Ionth/Day/Year)	3. Transaction Code and Voluntary Code (Instr. 8)	or Disposed (D) Of	5. Amount of Securities ship Form: Owned at Direct(I or Indirect)	Indirect Beneficial Ownership (Instr. 4)

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		Code V	Amount A/D Price			
Common Stock 02/2	/25/2003	P	700 A \$42.4400	3,000	D	
Common Stock				200	I	By Spouse

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).

> (over) SEC 1474 (3-99)

Fox, Marye Anne -February 2003

Form 4 (continued)

Table II Derivative
Securities
Acquired,
Disposed of,
or
Beneficially
Owned
(e.g., puts,
calls,
warrants,
options,
convertible
securities)

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1. Title of Derivative Security (Instr. 3)	sion or Exercise	3. Transaction Date (Month/ Day/ Year)	Code and Voluntary (V) Code (Instr.8)	5. Number of Derivative Securities Acquired (A) or Disposed (D) Of (Instr. 3,4 and 5)	Exercisable(DE) and Expiration	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	of Derivative Security	Securities Beneficially Owned at End of Month (Instr.4)	10. Owner- ship Form of Deriv- ative Security: Direct (D) or Indirect (I)	11.

Explanation of Responses:

** Intentional By: /s/ Lawrence J. Knopf, misstatements Attorney-in-fact or omissions of facts constitute Federal Criminal 02-27-2003 Violations. ** Signature of Reporting Person See 18 U.S.C. 1001 Date and 15 U.S.C. 78ff(a).

Power of Attorney

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.

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