SEC Fo	orm 4
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Employee Stock Option

(right to buy)

Remarks:

\$48.74

Explanation of Responses:

FORM	4
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UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

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

OMB APPROVAL									
OMB Number:	3235-0287								
Endine stand strangers by	urden								

Estimated average burden hours per response: 0.5

					-		()													
1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC /										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>SMIT</u>	<u>I IAN F</u>													Direct	or	10% Owner		wner		
					<u>MA</u> [VRTX]								:	X Office	(give title	title Other (s		specify		
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED				3. Date of Earliest Transaction (Month/Day/Year) 07/25/2012										EVP	& CF	0				
130 WAVERLY ST.				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) CAMBR	IDGE N	1A	02139									X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(5	State)	(Zip)																	
		Tak	ole I - Non	-Deriv	ativ	e Se	curities	s Ac	quired,	Dis	posed o	of, or	Ben	eficiall	y Owned	I				
1. Title of Security (Instr. 3) 2. Trans: Date (Month/I			action 2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 5)							es ally Following	Form:		7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount		(A) or (D)	Price		orted saction(s) r. 3 and 4)			(Instr. 4)	
			Table II - E (uired, D , option						Owned			· · · · · ·		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year) f ive	Execution Date,		4. Transaction Code (Instr. 8)				6. Date Ex Expiration (Month/Da		of Securities		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie: Beneficia Owned Following Reported Transacti (Instr. 4)	e s dly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)		
														Amount			I		1	

Date Exercisable

(1)

Expiration Date

07/24/2022

Title

In-Fact

Commor

Stock

** Signature of Reporting Person Da

Valerie L. Andrews, Attorney-

or Numbei

of Shares

36,250

\$0.00

Date

07/26/2012

36,250

D

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).

07/25/2012

1. The option vests in 16 quarterly installments beginning on 10/25/2012.

** 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.

Code V

Α

(A)

36,250

(D)

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.