SEC	Form 4
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DEC FUIIII 4							
FORM 4	UNITED STAT						
		Washington, D.C. 20549		OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	STATEME	ERSHIP	OMB Number: 3235-0287 Estimated average burden				
	Filed	pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940		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)				
LEIDEN JEFFREY M		MA [VRTX]	X Director		Owner		

,				— [±]	<u></u> [, KIM	1						X	Officer (give title		Other (s below)	pecify
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED 50 NORTHERN AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 07/21/2015								Delow)	CEO & Presid					
			4	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) BOSTO		1A	02210								Line)	-	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(3	State) Ta	(Zip)	Derivati	ve S	ecuritie	s Ac	quired.	Disi	posed o	of. or	Bene	eficially	Owned				
1. Title of Security (Instr. 3) 2. Tran Date		. Transacti Date Month/Day/	action 2A. Deemed Execution Dat		n Date,	e, Transaction Dispo Code (Instr.			Securities Acquired (A) (sposed Of (D) (Instr. 3, 4			Beneficia	rities Fo ficially (D) ed Following (I)		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount		(A) or (D)	Price	Transacti (Instr. 3 a	on(s)		ľ	(11311. 4)	
			Table II - De (e					uired, Di , option						Dwned		,	,	
Security or Exercise (Month/Day/Year) if any		Execution Date	Code	ansaction Derivative		Expiration Date (Month/Day/Year) L				le and A curities rlying vative S 7. 3 and	ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti	e s dly g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
												A	mount		(Instr. 4)			

Date Exercisable

(1)

Expiration Date

07/20/2025

Title

Common

Stock

Option

\$131.89

Explanation of Responses:

1. The option vests in 16 quarterly installments from 07/21/2015.

07/21/2015

Remarks:

Stock

Omar White, Attorney-In-Fact

** Signature of Reporting Person

Number of Shares

106,500

\$0.00

07/23/2015 Date

106,500

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).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code v

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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.

(A)

106,500

(D)