FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  MUELLER PETER					V	2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]									all applic Directo			on(s) to Iss 10% Ov Other (s	ner
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED					3. Date of Earliest Transaction (Month/Day/Year) 09/17/2012								below) below)  EVP, Global R&D, CSO						
130 WAVERLY ST.  (Street)  CAMBRIDGE MA 02139					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)																
		Tab	le I - N	lon-Deri	vative	Sec	uriti	ies Ac	quire	d, D	isposed o	of, or Be	eneficia	lly O	wned	<u> </u>			
		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 au		(A) or 3, 4 and 5	5. Amount of Securities Beneficially Owned Foll Reported		es ally Following	Form (D) or	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				msu. 4)			
Common Stock		09/17/2	2012			M		6,500	A	\$16.3	2 138,816		,816		D				
Common	Stock			09/17/2	2012				S <sup>(1)</sup>		6,500	D	\$57.52 <sup>(2</sup>	2)(3)	(3) 132,31		D		
Common	Stock														4,647			I	401(k)
Common Stock												15,920		I	Common Stock neld in rust. <sup>(4)</sup>				
		7	able I								posed of converti			y Ov	ned				
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)	ion Date,	4. Transa Code ( 8)				6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title ar Amount of Securities Underlyin Derivativ (Instr. 3 a	of s ng e Security	Deri	rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owr Forr Dire or Ir (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares	1					
Employee Stock Option Grant (right to	\$16.32	09/17/2012			M			6,500	(5)	)	07/14/2013	Common Stock	6,500	\$1	0.00	16,300	)	D	

## **Explanation of Responses:**

- $1.\ Transaction\ made\ pursuant\ to\ Dr.\ Mueller's\ company\ approved\ trading\ plan\ under\ Rule\ 10b5-1.$
- 2. Open market sales reported on this line occurred at a weighted average price of \$57.52 (range \$57.30 to \$57.90).
- 3. Dr. Mueller undertakes to provide (upon request by the SEC staff, the issuer or a security holder of the issuer) full information regarding the number of shares sold at each separate price.
- 4. Common stock held in grantor retained annuity trusts.
- 5. Fully vested.

## Remarks:

Valerie L. Andrews, Attorney-**In-Fact** 

09/19/2012

\*\* 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.