### FORM 4

# 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

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

Name and Address of Reporting Person*     BOGER JOSHUA S						2. Issuer Name <b>and</b> Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]									k all appli Directo	cable)	g Pers	son(s) to Iss 10% Ov Other (s	vner	
INCORF	(F) RTEX PHA PORATED PERLY ST	04/	3. Date of Earliest Transaction (Month/Day/Year) 04/11/2012  4. If Amendment, Date of Original Filed (Month/Day/Year)									below)		Filing	below)`					
(Street) CAMBR (City)			02139 (Zip)			4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Indi Line)  X										vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
			le I - N	1		_			_	d, D	isposed o			cially	_					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Exec if any	Deemed ecution Date, ny onth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			Beneficially Owned Followi		es ially Following	Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	ction(s)			(Instr. 4)	
Common	Common Stock 04/11/20				2012	12			M		4,000	A	\$15	5.87	634,949			D		
Common	mon Stock 04/11/2			2012	)12			S <sup>(1)</sup>		4,000	D	\$37.2	23(2)(3)	630,949			D			
Common	Stock														13	,286	I 401(k)		401(k)	
Common Stock														300	),000		I	Common Stock held in trust. <sup>(4)</sup>		
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	rersion (Month/Day/Year) of titive   Date (Month/Day/Year)   Execution Date, if any (Month/Day/Year)   Transaction Code (Instr.   Month/Day/Year)   Transaction Code (Instr.   8)   Securion Date, if any (Month/Day/Year)   Securion Date, if any (Month/Day/Year)   Transaction   Of Derivation Date, if any (Month/Day/Year)   Transaction   Of Derivation Date, if any (Month/Day/Year)   Of Deriv				urities uired or oosed o) tr. 3, 4	6. Date Expirat (Month	tion Da		7. Title a Amount Securitie Underlyi Derivativ (Instr. 3	of es ing /e Secui	D S (I	Price of erivative ecurity nstr. 5)		Owner Form: Direct or Indi (I) (Ins	Ownership	Beneficial Ownership ct (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amo or Num of Share	ber						
Stock Option	\$15.87	04/11/2012			M		4,000		(5)		07/21/2012	Commor Stock	4,00	00	\$0.00 15,314			D		

## **Explanation of Responses:**

- $1.\ Transaction\ made\ pursuant\ to\ Dr.\ Boger's\ company\ approved\ trading\ plan\ under\ Rule\ 10b5-1.$
- 2. Open market sales reported on this line occurred at a weighted average price of \$37.23 (range \$37.00 to \$37.43).
- 3. Dr. Boger 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-

04/12/2012

**In-Fact** 

\*\* 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.