## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

washington,	D.C.	2054

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

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
houre por roeponeo.	0.5							

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

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*     Connolly Thomas					VE	2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]								Check all D	ship of Reporti applicable) irector fficer (give title		Issuer Owner r (specify	
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 11/15/2013								X Officer (give title Other (specify below) SVP, Human Resources				
130 WAVERLY ST.  (Street)  CAMBRIDGE, MA 02139				4. If	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)	(	State)	(Zip)															
1. Title of Security (Instr. 3) 2. Tra			2. Transa Date			3. Transaction Code (Instr. 8) 4. Securities Al Disposed Of (D 5)			ies Ac	quired	(A) or	5. A	Amount of curities neficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
					(		,,	Code	v	Amount	(4	A) or D)	Price	Re Tra	ported nsaction(s) str. 3 and 4)	() (creating)	(Instr. 4)	
Common Stock 1			11/15	/2013			S <sup>(1)</sup>		150		D	\$61	.05	4,252	D			
Common Stock															150	I	401(k)	
		1	able II - I								sed of, onvertib				y Own	ed		
1. Title of Derivative Security (Instr. 3)  2. Conversor or Exern Price of Derivati Security			3A. Deem Execution if any (Month/Da	n Date,	4. Transaction Code (Instr. 8)		of E		Expiratio	5. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price Derivati Security (Instr. 5)	derivative Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
Evnlanation					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or	ount nber res				

1. Transaction made pursuant to Mr. Connolly's company approved trading plan under Rule 10b5-1.

## Remarks:

Valerie L. Andrews, Attorney-

In-Fact

\*\* Signature of Reporting Person Date

11/19/2013

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

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