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
vvasiliigtori,	D.C.	20343

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

1. Name and Address of Reporting Person* BOGER JOSHUA S					<u>V</u>	2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
(Last) (First) (Middle)														Officer below)	(give title	Other (: below)		specify			
C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 08/29/2012															
130 WAVERLY ST.						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) CAMBRIDGE MA 02139													X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(S	tate)	(Zip)																		
			le I - N	1		_				d, D	isposed o			ally (
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				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 ar			nd 5) Securit Benefic Owned		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct ndirect I tr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
Common Stock			08/29/2012		2		M		4,000	A	\$15.	63€		5,895	I)					
Common Stock			08/29/2012				S ⁽¹⁾		3,382	D	\$53.35	(2)(3)	633	3,513	I)					
Common Stock		08/29/2012				S ⁽¹⁾		618	D	\$54.02	(3)(4)	632	2,895	I)						
Common	Stock													13,286 I			I 4	401(k)			
Common Stock													300),000]	ı İ	Common Stock held in trust. ⁽⁵⁾				
		7	able I								posed of converti				wned						
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)		4. Transa Code (8)		5. Number of		6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title ar Amount of Securitie Underlyin Derivativ (Instr. 3 a	of s ng e Security	De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly D	0. Ownership Form: Orirect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amoun or Numbe of Shares	nber							
Employee Stock Option (right to buy)	\$15.6	08/29/2012			M			4,000	(6))	01/17/2013	Common Stock	4,000		\$0.00	70,951		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 \$53.35 (range \$53.12 to \$53.67).
- 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.
- $4. \ Open \ market \ sales \ reported \ on \ this \ line \ occurred \ at \ a \ weighted \ average \ price \ of \ \$54.02 \ (range \ \$53.68 \ to \ \$54.51).$
- 5. Common stock held in grantor retained annuity trusts.
- 6. Fully vested.

Remarks:

Valerie L. Andrews, Attorney-

08/30/2012

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.