FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OWR APPRO	VAL
OMB Number:	3235-0287
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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

1. Name and Address of Reporting Person* Silva Paul M						2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]									Check a	all applic Directo	cable)		Issuer Owner (specify
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 02/20/2018									X Officer (give title Officer (specify below) SVP & Corp Controller				
50 NORTHERN AVENUE (Street) BOSTON MA 02210					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	•	Zip)																
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)					ction	tion 2A. Deemed Execution Date,			3. 4. Securition			ies Acquired (A) of (D) (Instr. 3, 4			or 5. A Sec Ben Owr Rep		int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock 02/20/2							2018		Code S ⁽¹⁾	v	Amount 3,437	Amount (A) o (D)		Price \$158	(Instr.		tion(s) and 4) ,525	D	
Common Stock																169	I	401(k)	
		Та									osed of, onvertib				y Owi	ned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,		ransaction ode (Instr.		n of		6. Date Exercisal Expiration Date (Month/Day/Year		e Amount of		str. 3	8. Pric Deriva Securi (Instr.	vative (urity (r. 5) I (O. Number of derivative Securities Beneficially Dwned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	ount nber res					

Explanation of Responses:

Remarks:

/s/ Stephen Migausky, 02/21/2018 Attorney-in-Fact

** Signature of Reporting Person Date

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.

^{1.} Transaction made pursuant to Mr. Silva's company-approved trading plan under Rule 10b5-1.

^{*} 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).