FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE	S IN BENEFIC	CIAL OWNERSHI

	OMB APPRO	VAL						
	OMB Number:	3235-0287						
l	Estimated average burden							
	hours per response:	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

1. Name and Address of Reporting Person* Silva Paul M					VI	2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]									all appli Directo Officer	cable) or (give title	Othe	Owner r (specify		
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 05/06/2013									X Officer (give title Offier (specify below)  SVP & Corp Controller					
130 WAVERLY ST.  (Street)  CAMBRIDGE MA 02139					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								S. 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)	Di-				•			:	- f D								
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/				tion	on 2A. Dee Executi Year) if any		Deemed cution Date,		a, D action Instr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an		(A) or	5. Amount of		unt of ies ially Following	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Trans		ction(s) and 4)		(Instr. 4)		
Common	Stock			05/06/2	2013	13		М		937	A	\$39.0	)5	12	2,687	D				
Common Stock 05/06/20					2013	13			S <sup>(1)</sup>		230	D	\$76.12	2(2)(3)		2,457	D			
Commom Stock 05/06/20					2013	13		S <sup>(1)</sup>		707	D	\$77.56	(3)(4)	11	.,750	D				
Common Stock													169		Ι	401(k)				
		Т	able II								posed of converti			y Ov	vned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	on Date,	4. Transa Code ( 8)	action of		6. Date Exerci Expiration Dat (Month/Day/Ye		ite	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		Der Sec	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership ct (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares	1						
Stock Option (right to buy)	\$39.05	05/06/2013			M			937	(5)		02/03/2020	Common Stock	937	\$	60.00	2,813	D			

## **Explanation of Responses:**

- $1.\ Transaction\ made\ pursuant\ to\ Mr.\ Silva's\ company\ approved\ trading\ plan\ under\ Rule\ 10b5-1.$
- 2. Open market sales reported on this line occurred at a weighted average price of \$76.12 (range \$75.73 to \$76.27).
- 3. Mr. Silva 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 \$77.56 (range \$77.48 to \$77.63).
- 5. The option vests in 16 quarterly installments beginning on 02/04/2010.

## Remarks:

Kenneth L. Horton, Attorney-

05/08/2013

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.