FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1	OMB APPROVAL												
	OMB Number:			3235-028									

37 Estimated average burden hours per response: 0.5

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

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*  Sachdev Amit					VE	2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]									Check all a Dir V Off	ector cer (give title	10 O	0% Owner ther (specify		
(Last) (First) (Middle) . C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 11/16/2015									below) below) EVP, Policy, Access & Value					
50 NORTHERN AVENUE  (Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					
BOSTON   MA   02210															Form filed by More than One Reporting Person					
		Tabl	e I - No	n-Deriv	ative	Sec	curitie	s Acc	quired,	, Dis	posed o	f, or	Ben	efici	ally Owr	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date					Execution Date,		Transaction Disposed Code (Instr.		ties Acquired (A) d Of (D) (Instr. 3, 4			id 5) Secu Bend Own	nount of crities eficially ed Following orted	6. Ownersh Form: Dire (D) or Indir (I) (Instr. 4)	ct of Indirect					
									Code	v			N) or D)	Price	Tran	saction(s) r. 3 and 4)		(11150.4)		
Common Stock 11/16/					2015		S <sup>(1)</sup>		85		D	\$122	2.28	78,963						
Common Stock										882	I	401(k)								
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)	ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any				Transaction Code (Instr.		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)			
					Code			Date Exercisa		Expiration Date	Amour or Numbe of Title Shares		mber							

## **Explanation of Responses:**

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

## Remarks:

Omar White, Attorney-In-Fact 11/18/2015

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.