SEC Form 5

	FORM 5	UNITED STAT							
	Check this box if no longer subject to		OMB APPROVAL						
C	Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	ANNUAL	OMB Number: 3235-0 Estimated average burden						
\square	Form 3 Holdings Reported.		OWNERSHIP		hours per response:	1.0			
\square	Form 4 Transactions Reported.	Filed	d 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 Perso	n*	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of F (Check all applicab	tionship of Reporting Person(s) to Issuer all applicable)				

SACHS BRUCE I				VERTEX PHARMACEUTICALS INC / MA [VRTX]								(Cheo X		tor er (give title	9		Owner er (specify	
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2017								beior	•)		0010	,	
50 NORTHERN AVENUE				4. If Amendment, Date of Original Filed (Month/Day/Year)							· I	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) BOSTON MA 02		2210								X	Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(Sta	ate) (2	Zip)															
		Table	e I - Non-Deriv	ative Sec	uritie	es Ac	quire	ed, Di	sposed	of, or	Benefic	ially	v Owne	ed				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.) 8)		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)				Securit Benefic		es	6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership	
				(Monthibay)	rear)			Amour	nt	(A) or (D)	Price				Indirect (I) (Instr. 4)		(Instr. 4)	
Common Stock 12/20/2017				G ⁽¹⁾		1)	10,000		D	\$0.00	\$0.00		13,398		D			
		Та	ble II - Derivat (e.g., p	ive Secur uts, calls,									Owned					
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. Transaction Code (Instr. 8)	5. Nu of Deriv Secu (A) or Dispo of (D) (Instr and 5	rative rities ired osed . 3, 4	Expirati (Month) 4 Date		te Exercisable and ation Date th/Day/Year) Expiration Date		le and unt of rities rlying ative rity (Instr. 3) Amount or Number of Shares	nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	

Explanation of Responses:

1. Represents a gift to a charitable foundation.

Remarks:

Omar White, Attorney-In-Fact 01/17/2018

1.0

** Signature of Reporting Person Date

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

 \ast 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.