Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

CTATEMENIT	OF CHANCES	IN DENIETICIAL	OWNEDCHID
STATEMENT	OF CHANGES	IN BENEFICIAL	OMNEKSHIP

ı	OMB APPRO	VAL				
	OMB Number:	3235-0287				
l	Estimated average burde	en				
l	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

Name and Address of Reporting Person* Chodakewitz Jeffrey					2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]									(Ch	eck all appli Directo	cable)	ig Pers	son(s) to Iss 10% Ov Other (s	vner
(Last)	(F	irst)	(Middle)												below)			below)	·
C/O VERTEX PHARMACEUTICALS INCORPORATED					3. Date of Earliest Transaction (Month/Day/Year) 07/21/2015										EVP GM	IDA,	CMO		
50 NORTHERN AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)															,	iled by One	e Repo	orting Perso	n
BOSTO	N M	IA	02210										Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																
		Tab	ole I - Non	-Deriva	tive	Secu	urities	s Ac	quired,	Dis	posed o	f, or	Ben	eficiall	y Owned				
Date			2. Transac Date (Month/Da	Execution Date			Date,	Code (Instr. 5)					es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Date Execution Date, True Security or Exercise (Month/Day/Year) if any Cr			ate, Tra	ransaction of ode (Instr.) Secul (A) or Dispo		of Derivati Securiti Acquire (A) or Dispose of (D) (II	erivative (Month/Day/Year) ecurities cquired a) or		•	nd 7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Co	de V	, ((A)		Date Exercisab		Expiration Date	Title		Amount or Number of Shares					
Stock	\$131.89	07/21/2015		A			34,000		(1)		07/20/2025	Comn	non	34.000	\$0.00	34.00	0	D	

Explanation of Responses:

1. The option vests in 16 quarterly installments from 07/21/2015.

Remarks:

Omar White, Attorney-In-Fact 07/23/2015

** Signature of Reporting Person

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.