FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden 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

1. Name and Address of Reporting Person*  SMITH IAN F							2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]								all applic Directo Officer	,	g Perso	10% Ow Other (s	ner	
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED 50 NORTHERN AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 10/16/2017									X Officer (give title Officer (specify below)  EVP, COO					
(Street) BOSTON MA 02210					-   4. i	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)																				
			le I - I					_	•		isposed o			ally (				1		
1. Title of Security (Instr. 3)				2. Transacti Date (Month/Day)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Benefici Owned F		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct of Indirect Itr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)			Instr. 4)	
Common Stock				10/16/2017				M		2,125	Α	\$96.8	.87 118,		3,013		D			
Common Stock				10/16/2017				S <sup>(1)</sup>		200	D	\$154.01	(2)(3)	117	7,813	]	D			
Common Stock				10/16/2017					S <sup>(1)</sup>		875	D	\$155.03	(3)(4)	116	6,938		D		
Common Stock 10				10/16/2017				<b>S</b> <sup>(1)</sup>		850	D	\$156.24	4 <sup>(3)(5)</sup> 116,0		6,088		D			
Common Stock 10/16/201					017	.7			S <sup>(1)</sup>		200	D	\$157.07(3)(6)		115,888		D			
Common Stock														5,306		306	I		401(k)	
		Т	able								sposed of , converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed ition Date, h/Day/Year)	4. Transa Code ( 8)			Expira	e Exerc ation D h/Day/\		7. Title a Amount Securiti Underly Derivati (Instr. 3	of es ing ve Security	De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly C	.0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares	r						
Stock Option (Right to Buy)	\$96.87	10/16/2017			M			2,125	(1	7)	07/14/2024	Commo Stock	n 2,125		\$0.00	6,375		D		

## **Explanation of Responses:**

- 1. Transaction made pursuant to Mr. Smith's company-approved trading plan under Rule 10b5-1.
- 2. Open market sales reported on this line occurred at a weighted average price of \$154.01 (range \$153.58 to 154.43).
- 3. Mr. Smith 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.
- $4. \ Open \ market \ sales \ reported \ on this line \ occurred \ at \ a \ weighted \ average \ price \ of \ \$155.03 \ (range \ \$154.75 \ to \ \$155.52).$
- 5. Open market sales reported on this line occurred at a weighted average price of \$156.24 (range \$155.86 to \$156.73).
- 6. Open market sales reported on this line occurred at a weighted average price of \$157.07 (range \$156.96 to \$157.17).
- 7. The option vests in 16 quarterly installments from 7/15/2014.

## Remarks:

/s/ Omar White, Attorney-in-

10/18/2017

\*\* 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.