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).
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL										
OMB Number:	3235-0287									
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1. Name and Addre <u>Chodakewitz</u> (Last)	1 0	son* (Middle)	2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]		ionship of Reporting Perso all applicable) Director Officer (give title below)	on(s) to Issuer 10% Owner Other (specify below)
C/O VERTEX PHARMACEUTICALS INCORPORATED 50 NORTHERN AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 01/02/2018		EVP GMDA, C	CMO
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi Line)	idual or Joint/Group Filing (Check Applicable	
(Street) BOSTON	МА	02210		X	Form filed by One Repor Form filed by More than Person	-
(City)	(State)	(Zip)				

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

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)				5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V		Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	01/02/2018		М		3,438	A	\$73.51	57,862	D	
Common Stock	01/02/2018		S ⁽¹⁾		300	D	\$149.65 ⁽²⁾⁽³⁾	57,562	D	
Common Stock	01/02/2018		S ⁽¹⁾		675	D	\$150.87 ⁽³⁾⁽⁴⁾	56,887	D	
Common Stock	01/02/2018		S ⁽¹⁾		1,600	D	\$152.06 ⁽³⁾⁽⁵⁾	55,287	D	
Common Stock	01/02/2018		S ⁽¹⁾		863	D	\$152.8 ⁽³⁾⁽⁶⁾	54,424	D	

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$73.51	01/02/2018		М			3,438	(7)	01/01/2024	Common Stock	3,438	\$0.00	0	D	

Explanation of Responses:

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

2. Open market sales reported on this line occurred at a weighted average price of \$149.65 (range \$149.41 to \$149.92).

3. Dr. Chodakewitz 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 \$150.87 (range \$150.53 to \$151.50).

5. Open market sales reported on this line occurred at a weighted average price of \$152.06 (range \$151.70 to \$152.69).

6. Open market sales reported on this line occurred at a weighted average price of \$152.80 (range \$152.70 to \$153.03).

7. Fully vested.

Remarks:

<u>/s/ Omar White, Attorney-in-</u>

Fact

01/03/2018

** 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.