FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
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| 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] | | | | | | | | | | ip of Repo plicable) ctor er (give tit w) | | erson(s) to Is 10% O Other (below) | wner (specify | |
|--|---|--|--|--|---|--------------------------|--|--------------|----------|-----------------------------------|----------------|--|---|---|--|--|--|---|--|---------------------------------------|--|
| (Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED 50 NORTHERN AVENUE | | | | | | | of Earli 1018 | est Trar | nsac | ction (Mo | onth/ | Day/Year) | | | EV | VP, CO | 00 | | | | |
| 50 NOR. | HERN AV | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | |
| (Street) BOSTO | N M | A | 02210 | | _ | | | | | | | | | | | For | , | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | | | |
| | | Tab | le I - Noi | n-Deriv | /ative | e Se | curit | ies Ac | cqι | uired, | Dis | posed o | of, o | r Ber | neficia | lly Own | ed | | | | |
| 1. Title of Security (Instr. 3) | | | | 2. Transaction Date (Month/Day/Year) | | ar) | 2A. Deemed Execution Date, if any (Month/Day/Year | | ´ | 3. Transa Code (I 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | d Secu Bene Owne | icially d Followin | Foi (D) | Ownership orm: Direct) or Indirect (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code V Amount (A) or (D) Price Reported Transaction(s) (Instr. 3 and 4) | | | | | | | | (5 4) | | | | | | | | |
| Common | Common Stock | | | | L/2018 | 8 | | | | M | | 2,155 | 5 | A | \$91. | 05 | 18,854 | | D | | |
| Common Stock | | | | 05/11 | 11/2018 | | | | | M | | 1,94 | 1 | A | \$86. | 52 | 50,795 | | D | | |
| Common | Stock | | | 05/11 | 1/2018 | 8 | | | | S ⁽¹⁾ | | 4,096 | 6 | D | \$15 | 5 | | | | | |
| Common | Stock | | | | | | | | | | | | | | | | 5,306 | 06 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deems Execution if any (Month/Da | ed Date, | 4. Transa | ansaction ode (Instr. | | 5. Number of | | Date Exc xpiration lonth/Da | ercisa Date | able and | 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4) | | Security d 4) | 8. Price of Derivative Security (Instr. 5) | e derivat Securit Benefic Owned Follow Report | tive ties cially l ing ed ction(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Da Ex | ate kercisabl | | expiration Pate | Title | | Amount or Number of Shares | | | | | | |
| Stock Option (Right to Buy) | \$91.05 | 05/11/2018 | | | M | | | 2,155 | | (2) | 0 | 2/01/2026 | | nmon ock | 2,155 | \$0.00 | 15, | ,086 | D | | |

Explanation of Responses:

\$86.52

- 1. Transaction made pursuant to Mr. Smith's company-approved trading plan under Rule 10b5-1.
- 2. The option vests in 16 quarterly installments from 2/2/2016.
- 3. The option vests in 16 quarterly installments from 2/3/2017.

05/11/2018

Remarks:

Stock Option (Right to

Buy)

/s/ Omar White, Attorney-in-

1,941

Stock

\$0.00

05/15/2018

21,358

D

Fact

** 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.

1,941

(3)

02/02/2027