SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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

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

	01712							
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person* BOGER JOSHUA S			2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC /		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
,			<u>MA</u> [VRTX]		Officer (give title	Other (specify			
(Last)	(First)	(Middle)			below)	below)			
C/O VERTEX PHARMACEUTICALS INCORPORATED			3. Date of Earliest Transaction (Month/Day/Year) 07/22/2015						
50 NORTHERN AVENUE			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indi Line)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)				X	Form filed by One Re	porting Person			
BOSTON	MA	02210			Form filed by More th Person	an One Reporting			
(City)	(State)	(Zip)							
		Table I - Non-D	erivative Securities Acquired, Disposed of, or Ben	eficially	Owned				

4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 5. Amount of 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 6. Ownership 7. Nature 3. Transaction Date Execution Date. Securities Form: Direct of Indirect if any (Month/Day/Year) Code (Instr. 8) Beneficially Owned Following (D) or Indirect (I) (Instr. 4) Beneficial Ownership (Month/Day/Year) Reported Transaction(s) (Instr. 3 and 4) (Instr. 4) (A) or (D) Code v Amount Price Common Stock 07/22/2015 Μ 10,400 A \$35.64 355,684 D Common Stock 07/22/2015 **S**⁽¹⁾ \$130.82(2)(3) 9,200 D 346,484 D 07/22/2015 **S**⁽¹⁾ \$131.68(3)(4) D Common Stock 1.200 D 345.284 401(k) **Common Stock** 13,286 T Common Stock Common Stock 122,700 T held in trust

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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		of Expiration Date Derivative (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr.		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)	\$35.64	07/22/2015		М			10,400	(5)	02/01/2016	Common Stock	10,400	\$0.00	281,600	D	

Explanation of Responses:

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

2. Open market sales reported on this line occurred at a weighted average price of \$130.82 (range \$130.27 to \$131.22).

3. Dr. Boger 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 \$131.68 (range \$131.47 to \$131.80).

5. Fully vested.

Remarks:

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

** 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.