FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
---------------	------------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL				
OMB Number:	3235-0287				
Estimated average burd	len				
hours per response:	0.5				

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

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* <u>Kearney Terrence C</u>				VI	2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]										5. Relationship of Reporting Person(s) to Is (Check all applicable) X Director 10% C				vner		
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 05/19/2015											(give title		Other (s below)	pecify	
50 NORTHERN AVENUE					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) BOSTON MA 02210															X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S		(Zip)																		
		Tab	le I - Nor	n-Deriv	ative	Se	curiti	ies Ac	quir	ed, D	ispo	osed o	f, or Be	nefi	cially	Owned	l				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution [Code (Ins		on I				4 and Securiti Benefic Owned		es Fo ially (D) Following (I)		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Co	ode V	,	Amount	(A) oi (D)	r Pr	ice		ansaction(s) str. 3 and 4)			(Instr. 4)	
Common Stock 05/19/2					/2015				1	М		1,500) A	\$	56.99	9 1,500			D		
		Т	able II -										or Ben			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	1. Fransaction Code (Instr. 3)		of Deri Sec Acq (A) o Disp of (I	oosed D) tr. 3, 4	Expira	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title an Amount o Securities Underlyin Derivative (Instr. 3 an	f s g e Secu	E	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	ode V		(D)	Date Exerc	cisable	Exp	oiration te	Title	Amo or Num of Shai	ber						
Stock Option (right to buy)	\$56.99	05/19/2015			M			1,500	((1)	05/1	16/2021	Common Stock	1,5	00	\$0.00	375		D		

Explanation of Responses:

1. Fully vested.

Remarks:

Omar White, Attorney-In-Fact 05/21/2015

** 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.