Silva Paul M Form 4 February 05, 2018

FORM 4

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

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

may continue. *See* Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

(First)

Silva Paul M

(Last)

2. Issuer Name **and** Ticker or Trading

Symbol

VERTEX PHARMACEUTICALS INC / MA [VRTX]

INC / MA [VRTX]

3. Date of Earliest Transaction

(Month/Day/Year) 02/01/2018

5. Relationship of Reporting Person(s) to Issuer

OMB APPROVAL

10% Owner

Other (specify

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

(Check all applicable)

C/O VERTEX

C/O VERTEX
PHARMACEUTICALS

(Middle)

(Zin)

INCORPORATED, 50 NORTHERN AVENUE

(City)

(Street)

(State)

4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

SVP & Corp Controller

Applicable Line)

Director

below)

X_ Officer (give title

X Form filed by One Reporting Person ____ Form filed by More than One Reporting

Perso

BOSTON, MA 02210

(City)	(State)	(Zip) Table	e I - Non-D	Derivative	Secui	ities Acqui	ired, Disposed of	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction(A) or l		rities Acquired Disposed of (D) 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	02/01/2018		M	8,594	A	\$ 96.87	25,228	D	
Common Stock	02/01/2018		S <u>(1)</u>	8,594	D	\$ 174.11	16,634	D	
Common Stock	02/02/2018		M	1,289	A	\$ 91.05	17,923	D	
Common Stock	02/02/2018		S <u>(1)</u>	1,289	D	\$ 169.42	16,634	D	

Common Stock

169 I

401(k)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

> 8. 1 De Sec (In

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. Transactic Code (Instr. 8)	5. Number proof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 I S (
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 96.87	02/01/2018		M	8,594	(2)	07/14/2024	Common Stock	8,594	
Stock Option (Right to Buy)	\$ 91.05	02/02/2018		M	1,289	(3)	02/01/2026	Common Stock	1,289	

Reporting Owners

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

Silva Paul M C/O VERTEX PHARMACEUTICALS INCORPORATED **50 NORTHERN AVENUE** BOSTON, MA 02210

SVP & Corp Controller

Signatures

/s/ Omar White, 02/05/2018 Attorney-in-Fact

**Signature of Reporting Person Date

2 Reporting Owners

Explanation of Responses:

- * 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).
- (1) Transaction made pursuant to Mr. Silva's company-approved trading plan under Rule 10b5-1.
- (2) The option vests in 16 quarterly installments from 7/15/2014.
- (3) The option vests in 16 quarterly installments from 2/2/2016.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.