FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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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

OMB APPROVAL 3235-0287 Estimated average burden 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

Name and Address of Reporting Person* Silva Paul M						2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]									all app Direc	,	ng Per	rson(s) to Is 10% O Other (wner
(Last)	(Fir	st) (N	Middle)													<i>I</i>)		below)	
C/O VERTEX PHARMACEUTICALS INCORPORATED					3. Date of Earliest Transaction (Month/Day/Year) 02/10/2021										SVP	& Chief A	ccour	iung Om	icer
50 NORTHERN AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line) X Form filed by One Reporting Person					
BOSTO	N M	A 0	2210												Form filed by More than One Reporting Person				
(City)	(Sta	ate) (Z	Zip)																
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	uired	, Dis	posed of	, or B	enefic	cially	Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execu if any	Deemed ecution Date, ny onth/Day/Year)				4. Securities Disposed O 5)			4 and Securi Benefi		ties cially I Following	Form (D) o		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price)	Transa	ction(s) 3 and 4)			(111501.4)
Common Stock 02/10					2021				F		651	D	\$21	4.16	6 25,361			D	
Common	Common Stock														169		I	401(k)	
		Tal	ole II -								osed of, c				Owne	d			
1. Title of Derivative Security (Instr. 3)	rative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of	r osed : 3, 4	Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)				9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date		Amount or Number of Shares						

Explanation of Responses:

Remarks:

/s/ Sabrina Yohai, Attorney-in-02/12/2021

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.