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*     Sachdev Amit						2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]										all app Direc	,		wner	
INCORP	(First) (Middle) . RTEX PHARMACEUTICALS PORATED					3. Date of Earliest Transaction (Month/Day/Year) 11/15/2021									Λ	below) below)  EVP, Chief Patient Officer				
50 NORTHERN AVENUE						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					··
	(Street) BOSTON MA 02210														X	X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	(Sta	ate) (Z	Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				2. Transaction Date (Month/Day/Ye	ar) if	2A. Deemed Execution Date, if any (Month/Day/Year)				ansaction de (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			secur Benef Owne		cially I Following	Forr (D) ( Indi	n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership
			Ì	Cod	le V			Ai	mount	(A) or (D)	Price	Reported Transactio (Instr. 3 an		action(s)	(Inst	tr. 4)	(Instr. 4)			
Common Stock				11/15/202	1				<b>S</b> <sup>(1)</sup>	)		21	D	\$186.7	8(2)(3)		1,958		D	
Common Stock			11/15/2023	1				S <sup>(1)</sup>	)		30	D	\$187.4	8 <sup>(3)(4)</sup> 31,9		1,928		D		
Common	Stock														882				I	401(k)
Common	Common Stock														1		15,573			Held in Trust
		Tal	ble	II - Derivati (e.g., pu	ve S its, c	ecur alls,	ities war	Acc rant	quii	red, l optio	Disp ns, o	osed of converti	, or B ble s	enefici ecuritie	ally (	Owne	d			
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise (Month/Day/Year) Price of Derivative Security  3. Transaction Date (Month/Day/Year) (Month/Day/Year)  3. Transaction Date (Execution Date, if any (Month/Day/Year)				ecution Date, ny		Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expira	tion D	ercisable and Date Ny/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		rice of ivative urity tr. 5)		y Di	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D	Date (D) Exerc		sable	Expiration Date	n Title	Amoun or Numbe of Shares	r						

## **Explanation of Responses:**

- $1.\ Transaction\ made\ pursuant\ to\ Mr.\ Sachdev's\ company\ approved\ trading\ plan\ under\ Rule\ 10b5-1.$
- 2. Open market sales reported on this line occurred at a weighted average price of \$186.78 (range \$186.22 to \$187.19).
- 3. Mr. Sachdev 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 \$187.48 (range \$187.24 to \$187.85).

## Remarks:

/s/ Sabrina Yohai, Attorney-in-

11/16/2021

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.