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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

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

intende defense	ed to satisfy the e conditions of ee Instruction 1	affirmative Rule 10b5-																	
Name and Address of Reporting Person* Kewalramani Reshma					2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC /									Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Kewairamani Keshma</u>						MA [VRTX]									Direct	tor		10% O	vner
															Office below	er (give title		Other (s	specify
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED					3. Date of Earliest Transaction (Month/Day/Year) 11/08/2024									CEO & President					
50 NOR	ΓHERN AV	ENUE			4. If Amendment, Date of Original Filed (Month/Day/Year)							6 In	6. Individual or Joint/Group Filing (Check Applicable						
(Ott)						The information of the control of th							Line	Line)					
(Street) BOSTO	N M	A 0	2210										Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Z	Zip)		Felsui														
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or I	Bene	ficial	ly Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date,		Date,	3. Transaction Code (Instr. 8) 4. Securitie Disposed C 5)		es Acquired (A) Of (D) (Instr. 3, 4		A) or , 4 and	Benefic	ties cially Following	Forn (D) c	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount (A) or (D)		or F	rice	Transaction(s)				(111541. 4)
Common Stock 11/08/						2024		S ⁽¹⁾		15,198	I	D	\$515	75,772			D		
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)	if any	emed ion Date, /Day/Year)	4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Code V (A) (D)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		S (s. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Date Exercis	able	or Nu Expiration of			ber							

Explanation of Responses:

1. Transaction made pursuant to Dr. Kewalramani's company approved trading plan under Rule 10b5-1, which was entered into on 02/07/2024.

Remarks:

/s/ Christiana Stevenson, Attorney-in-Fact

11/12/2024

** 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.