Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response:	0.5							

					01 36	ection 3	0(11) 01	uie ii	nvesime	ent Co	прапу Аст о	1 1940							
1. Name and Address of Reporting Person* <u>Arbuckle Stuart A</u>				<u>VE</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Loot)	<b>/</b> Fi-	rot) (A	انططاما											X	belov	er (give title v)		Other (s below)	specify
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED					3. Date of Earliest Transaction (Month/Day/Year) 02/10/2021									EVP, Chief Commercial Officer					
50 NORTHERN AVENUE				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street)	N M	A 0	2210										X Form filed by One Reporting Person Form filed by More than One Reportin Person						
(City)	(St	ate) (Z	Zip)																
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired	, Dis	posed of	, or B	enefi	cially	/ Own	ed			
1. Title of Security (Instr. 3)  2. Transacting Date (Month/Day)			Execution (Many )		Deemed cution Date, y nth/Day/Year)		3. 4. Securities Acc Transaction Code (Instr. 8) 5. 5.				4 and Secur Benef Owne		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) o	Price	•		saction(s) r. 3 and 4)			(Instr. 4)
Common Stock 02/10/2				02/10/2	.021			F		3,101	D	\$21	4.16 6		66,856		D		
Common	ommon Stock												140				I	401(k)	
		Tal	ole II -								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date Execution Date or Exercise (Month/Day/Year) if any		tion Date,	4. Transaction Code (Instr. 8)		5. Num of Deriva Securi Acqui (A) or Dispos of (D) (Instr. and 5)	ative ities red sed 3, 4	6. Date Expira (Month	tion D	ear) Securities Underlying Derivative Security (Ins 3 and 4)		nt of ities lying ative ity (Instr			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
													or Numbe						

Date Exercisable

**Explanation of Responses:** 

Remarks:

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

of Shares

Title

**Fact** 

Expiration Date

\*\* 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.

(A) (D)