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

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	iuc. Sec		Filed							es Exchang npany Act o		of 1934		nours	s per re	esponse:	0.5
1. Name and Address of Reporting Person*  MCGLYNN MARGARET G					2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]								Check all a	hip of Reporting Pers pplicable) ector		erson(s) to Is		
(Last)	(Fir	rst) (N	/liddle)				_								icer (give title ow)		Other (below)	specify
C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 08/25/2020												
50 NORTHERN AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	N MA	A 0	2210											X Fo				
(City)	(Sta	ate) (2	ip)															
		Table	I - Noi	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	osed of	, or E	Benefic	ially Ow	ned			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Dat		Date,	3. Transaction Code (Instr. 8)				uired (A) o Instr. 3, 4	and Secu Bend Own	nount of irities eficially ed Following orted	Forr (D)	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) (D)	or Price	Tran	saction(s) r. 3 and 4)			(111501. 4)	
Common Stock 08/25/					2020		<b>G</b> <sup>(1)</sup>	V	3,707	Г	\$0	.00 877			D			
		Tal									osed of, o				ed			
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution Curity or Exercise (Month/Day/Year) if any				n Date, Transaction Code (Instr.		5. Number of 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 Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares					

## **Explanation of Responses:**

1. This transaction represents a charitable donation effective August 25, 2020.

## Remarks:

/s/ Sabrina Yohai, Attorney-in-08/26/2020

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.