FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERS	HIP
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**OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify					
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED					3. Date of Earliest Transaction (Month/Day/Year) 02/03/2021									X below) SVP & Chief Accounting Officer					
50 NORTHERN AVENUE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) BOSTON MA 02210													X Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(St	ate) (Z	Zip)																
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	or Be	enefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)						Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			4 and Securit Benefic		ies :ially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D) Pr		e	Transaction(s) (Instr. 3 and 4)				(IIISti. 4)
Common Stock 02/03/20					2021	021			A		4,220(1)	A \$		.00	19,152			D	
Common Stock 02/03/2					2021	021					3,226(2)	A	\$0.00		22,378			D	
Common Stock 02/03/2				2021	021			A 3,634 <sup>(3)</sup>		A	\$0.	.00	26,012			D			
Common Stock												169		I	401(k)				
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)	ative Conversion Date Executive or Exercise (Month/Day/Year) if any		if any	emed on Date, (Day/Year)	4. Transa Code ( 8)		of		6. Date Exerci Expiration Dat (Month/Day/Ye		te	3 and 4	nt of ties ying tive ty (Instr. 1) Amount or	Der Sec (Ins	ivative urity tr. 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)	Beneficial Ownership (Instr. 4)
					Code	v			Date Exercisable		Expiration Date	Numb of Title Share							

## **Explanation of Responses:**

- 1. Represents earned performance shares with respect to a performance stock unit award granted on 02/06/2018 that contained performance-vesting requirements. The issuer's management development and compensation committee certified as to the level of performance-goal attainment on 02/03/2021 and the shares will vest on 02/17/2021.
- 2. Represents earned performance shares with respect to a performance stock unit award granted on 02/05/2020 that contained performance-vesting requirements. The issuer's management development and compensation committee certified as to the level of performance-goal attainment on 02/03/2021 and the shares will vest in installments beginning on 02/10/2021.
- 3. Restricted stock unit award that vests in installments beginning on 02/17/2022.

## Remarks:

/s/ Sabrina Yohai, Attorney-in-02/05/2021 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.