FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL										
OMB Number: 3235-028										
Estimated average burden										
hours per response: 0										

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

1. Name and Address of Reporting Person* Bozic Carmen (Corp.) (Middle)					2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]								(Check all app Direc		plicable) ctor er (give title		Person(s) to Issuer 10% Owner Other (specify below)			
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED 50 NORTHERN AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 02/10/2021									EVP and CMO						
(Street) BOSTON MA 02210						4. If Amendment, Date of Original Filed (Month/Day/Year)								5. Indiv Line) X	,					
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					Execution Date,		3. 4. Securities Acquired (Disposed Of (D) (Instr. 8) 5.			red (A) o str. 3, 4 a	4 and Secu Bene		cially Following	Form:	Direct of Indirect Itr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) o (D)	r Price	Tuo'		ction(s)			(III3ti. 4)	
Common Stock 02/10/20					021	D21 F 2,367 D \$		\$21	4.16	16 33,575		l I	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)	e of 2. 3. Transaction Additional SA. Deemed Execution Date, if any			5. Number of Ocide (Instr. Derivative		vative rities nired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)). wnership orm: irect (D) · Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	e V (A) (D)				Expiration Date	n of Title Sha									

Explanation of Responses:

Remarks:

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

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.