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(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* LEIDEN JEFFREY M (Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED 50 NORTHERN AVENUE (Street) BOSTON MA 02210						2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX] 3. Date of Earliest Transaction (Month/Day/Year) 05/05/2023 4. If Amendment, Date of Original Filed (Month/Day/Year) Rule 10b5-1(c) Transaction Indication											5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner X Officer (give title Other (specify below) Executive Chairman 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)		X	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is a satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											lan that is inte	ended to							
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year		2A. Deem Execution if any (Month/D		Date,	Co	Transactio Code (Inst			Securities A)	Securi Benefi Owned	5. Amount of Securities Beneficially Owned Following Reported		m: Direct or irect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Co	de	v	Am	nount	(A) or (D)	P	Price		Transaction(s) (Instr. 3 and 4)		(111341. 4)		(111041. 4)	
Common Stock				05/05/2023				S	S ⁽¹⁾			708	D	D \$349.3		(2)(3) 36,683		6,683		D		
Common	Stock		05/05/2023					S	(1)			171	D	D \$35		3(2)(4)		36,512		D		
Common	Stock		05/08/2023				S	S ⁽¹⁾			1,125	D	D \$349		35,387		D					
Common Stock																		440			I	401(k)
		Tal	ole	II - Derivati (e.g., pເ)wne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if a	Deemed scution Date, ny onth/Day/Year)		e V	on r.	5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr. and 5)	tive ties ed	Expiration Date				Am Sec Und Der Sec 3 a	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) Amount or Numbor of Share:				9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- 1. Transaction made pursuant to Dr. Leiden's company approved trading plan under Rule 10b5-1, which was entered into on 11/01/2022.
- 2. Dr. Leiden undertakes to provide (upon request by the SEC staff, the issuer or a security holder of the issuer) full information regarding the number of shares sold at each separate price.
- 3. Open market sales reported on this line occurred at a weighted average price of \$349.38 (range \$349.00 to \$349.95).
- 4. Open market sales reported on this line occurred at a weighted average price of \$350.30 (range \$350.12 to \$350.40).

Remarks:

/s/ Christiana Stevenson, 05/09/2023 Attorney-in-Fact

** Signature of Reporting Person

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.