Instruction 1(b).

FORM 4

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

Washington,	D.C.	20549	
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Check this box if no longer subject	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
to Section 16. Form 4 or Form 5	
obligations may continue. See	
1 1 1 405	=

**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					2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]									Check X	ationship of Reporting all applicable)  Director  Officer (give title below)  Executive		10% Ov		wner (specify
	C/O VERTEX PHARMACEUTICALS					3. Date of Earliest Transaction (Month/Day/Year) 02/20/2024								X					
INCORPORATED 50 NORTHERN AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)								. Indivine)		dual or Joint/Group Filing (Check Applical Form filed by One Reporting Person				
(Street) BOSTO	Street) BOSTON MA 02210					Dulo 10h5 1(a) Transaction Indication								Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)		$ _{\square}$	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In													
		Table	I - No	n-Deriva	tive S	Secu	rities	Acc	quired	, Dis	posed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day					//Year) Execut		eemed ution Date, th/Day/Year)				s Acquired (A) If (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) o (D)	r Price		Transa	saction(s) r. 3 and 4)			(111311. 4)			
Common Stock 02/20/20					024			F		4,118	D	\$420	0.58 1		13,778		D		
Common Stock									440		440	40 I 4		401(k)					
		Tal	ole II -								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expira (Month	tion D		7. Title Amou Secur Under Deriva Secur 3 and	nt of ities lying ative ity (Instr.	Der Sec	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						

**Explanation of Responses:** 

Remarks:

/s/ Christiana Stevenson, Attorney-in-Fact

02/21/2024

\*\* 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.