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(b).

## 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

Name and Address of Reporting Person*     Sanna Bastiano						2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]								(Ch	eck all app Direc	tor er (give title	ng Pers	10% Ov Other (s	vner
(Last) (First) (Middle)  C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 02/01/2023										Cell & G	enetic	,	es
50 NORTHERN AVENUE  (Street)  BOSTON MA 02210						4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				on
(City)	(Sta		Zip)																
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or B	Bene	ficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)					Execut y/Year) if any		Deemed cution Date, y oth/Day/Year)		3. Transaction Code (Instr. 8)  4. Securitie Disposed C 5)					Benefi	ties cially I Following	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) (D)	or	Price	Transa	action(s) 3 and 4)			(111341. 4)			
Common	2023				A		9,092(1)	A	A	\$0.0	0 4	47,090		D					
Common	Stock 02/01/20					023			A		12,314(2)	) A	1	\$0.0	0 5	59,404		D	
Common	Common Stock 02/01/2					2023			A		7,866(3)	A	A	\$0.0	0 6'	67,270		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transaction Code (Instr. 8)		of	iired r osed ) r. 3, 4	6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	y C	LO. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Title Shares						

## **Explanation of Responses:**

- 1. Represents earned performance shares with respect to a performance stock unit award granted on 03/01/2020 that contained performance-vesting requirements. The issuer's management development and compensation committee certified as to the level of performance-goal attainment on 02/01/2023 and the shares will vest on 02/13/2023.
- 2. Represents earned performance shares with respect to a performance stock unit award granted on 02/01/2022 that contained performance-vesting requirements. The issuer's management development and compensation committee certified as to the level of performance-goal attainment on 02/01/2023 and the shares will vest in installments beginning on 02/24/2023.
- 3. Restricted stock unit award that vests in installments beginning on 02/10/2024.

## Remarks:

/s/ Christiana Stevenson, Attorney-in-Fact

02/03/2023

\*\* 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.