FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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

1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC /									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
MCKENZIE DIANA					MA [VRTX]									X Director			10% Ow	ner		
(Last) (First) (Middle)				_ [<u>-</u>	THE CAREA									Officer (give title below)			Other (specify below)			
C/O VERTEX PHARMACEUTICALS INCORPORATED					3. Date of Earliest Transaction (Month/Day/Year) 04/15/2021															
50 NORTHERN AVENUE				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														X Form filed by One Reporting Person						
BOSTON MA 02210			02210											Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																	
		Ta	ble I - Non-De	erivati	ve Se	ecurities	s Ac	quired, D	isp	osed c	of, or Be	nefi	cially	Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				•	Execution			Transaction Disposed (ties Acquired (A) or d Of (D) (Instr. 3, 4 ar			Beneficial Owned Fo	s Form ally (D) collowing (I) (II		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	,	Amount	(A) c	r F	rice	Reported Transaction (Instr. 3 and	on(s)			(Instr. 4)		
	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amo or Nun of S			(Instr. 4)					
Deferred Stock Units	(1)	04/15/2021		A		124.904		(1)		(1)	Common Stock	124	.904	\$220.17	384.46	69	D			
- - - - - - - - - - - - - - - - - - -	n of Respons	96.																		

1. Each deferred stock unit represents one share of common stock and is paid out in common stock upon the earliest to occur of (i) termination of Ms. McKenzie's service on our board of directors, (ii) a change of control of our company and (iii) Ms. McKenzie's disability or death.

Remarks:

/s/ Sabrina Yohai, Attorney-in-

** Signature of Reporting Person

Fact

04/16/2021

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.