FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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* Biller Jonathan (Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED 50 NORTHERN AVENUE | | | | | 3. Da 02/0 | Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX] Juste of Earliest Transaction (Month/Day/Year) 02/01/2023 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director | | | | | vner specify r | |
|---|--|--|--------------|-----------------------------------|---------------------------------|--|--------------------------|--|--|----|--|---|--------------------------------------|--|--|---|--|--|----------------------|--|
| (Street) BOSTO | | | 2210 Zip) | | | | | | | | | | | Line) | Form | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | tion 2A. Deemed Execution Date, | | 3. 4. Securities | | es Acquired (A) Of (D) (Instr. 3, 4 | |) or 5. Amo 4 and Securit Benefic | | unt of ies :ially Following | Form | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | Code | v | Amount | (A) (D) | or Pr | ice | Transaction(s) (Instr. 3 and 4) | | | | (501 -7) | | | | | | | |
| Common Stock 02/01/2 | | | | | | 2023 | | | A | | 6,293(1) | A | \$ | 0.00 | 00 11,587 | | | 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 Execution Date (Month/Day/Year) (Month/Day/Year) 3A. Deemed Execution Date if any (Month/Day/Year) | | on Date, | Transaction Code (Instr. 8) | | of | r osed) : 3, 4 | 6. Date Exerc Expiration Da (Month/Day/Y | | te | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | De Sei (In: | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. Restricted stock unit award that vests in installments beginning on 02/10/2024.

Remarks:

/s/ Christiana Stevenson,

02/03/2023

Attorney-in-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.