Washington, D.C. 20549												OMB APPROVAL					
Check to Sec	TATEMEN	IT	OF CHA	ANG	SES I	NE	BENEFIC	SIAL (OWNE	ERSH	ΗP	Estima	Number: ated average burg				
Instruc	Filed	pu o	irsuant to Sect or Section 30(h	tion 16 1) of th	6(a) of the linves	ne Se stmen	curities Excha t Company A	ange Act ct of 194	of 1934 0			nours	per response:	0.5			
1. Name and Address of Reporting Person [*] ALTSHULER DAVID					1									all applic Directo	able)	ng Person(s) to 1 10% C	
(Last)	.ast) (First) (Midd			dle)									Х	below)		below)	
C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 02/24/2022								EVP, C	lobal Re	search and C	SO
50 NORTHERN AVENUE					4	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicab Line)				
(Street)													Line) X	Form fi	led by One	e Reporting Per	son
BOSTO	BOSTON MA 02210													Form filed by More than One Reporting Person			
(City)	(St	ate)	(Zip)														
		Tabl	e I - I	Non-Deriva	tiv	ve Securiti	es A	cquir	ed,	Disposed	of, or	Benefi	cially	Owne	d		
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year		r) 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Beneficia Owned F		es ially Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)	(Instr. 4)	(Instr. 4)
Common Stock				02/24/2022				F		6,038	D	\$227	.86	43,	43,649	D	
Common Stock				02/25/2022				S ⁽¹⁾		1,040	D	\$229.4	1 ⁽²⁾⁽³⁾	42,	609	D	
Common Stock				02/25/2022				S ⁽¹⁾		3,188	D	\$230.6	2 ⁽³⁾⁽⁴⁾	39,	421	D	
Common Stock				02/25/2022				S ⁽¹⁾		2,784	D	\$231.6	4(3)(5)	36,	637	D	
Common Stock 02/2				02/25/2022	02/25/2022					560	D	\$232.68 ⁽³⁾⁽⁶⁾		36,077		D	
		Та	able	II - Derivati (e.g., pu		Securities , calls, wa								wned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) 3. Transaction (Month/Day/Year) 3. Transaction (Month/Day/Year) 3. Transaction (Month/Day/Year)		4. Tra	ansaction of ode (Instr. Do Ad (A	Numb f erivativ ecuritio cquire () or	ber 6. Date E Expiratio (Month/D ed		xercisable an	d 7. Ti Amo Sec Und Deri Sec	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		vative curity Str. 5) E	9. Number of derivative Securities Beneficially Dwned Following	Ownership Form:	Benefic Owners (Instr. 4		
	Security					of (Ir	ispose f (D) nstr. 3, nd 5)				3 an	id 4)		1	Reported Transactior Instr. 4)	n(s)	

Explanation of Responses:

1. Transaction made pursuant to Mr. Altshuler's company approved trading plan under Rule 10b5-1.

2. Open market sales reported on this line occurred at a weighted average price of \$229.41 (range \$228.91 to \$229.81).

3. Mr. Altshuler 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.

(A) (D)

Date Exercisable

4. Open market sales reported on this line occurred at a weighted average price of \$230.62 (range \$230.07 to \$231.05).

5. Open market sales reported on this line occurred at a weighted average price of \$231.64 (range \$231.08 to \$232.07).

6. Open market sales reported on this line occurred at a weighted average price of \$232.68 (range \$232.43 to \$232.87).

Remarks:

/s/ Sabrina Yohai, Attorney-in-02/28/2022

<u>Fact</u>

Expiration Date

** Signature of Reporting Person Date

or Number

of Shares

Title

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).

Code V

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.