

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
2022 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)**

EEOC Standard Form 100 (SF 100)
Revised 08/2023
OMB Control Number: 3046-0049
Expiration Date: 08/31/2024

SECTION A – TYPE OF REPORT
CONSOLIDATED REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID
T029273

EMPLOYER NAME
VERTEX PHARMACEUTICALS INCORPORATED

ADDRESS
50 NORTHERN AVENUE

CITY/TOWN
BOSTON

STATE
MA

ZIP CODE
02210

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID

HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS

CITY/TOWN

STATE

ZIP CODE

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)

SECTION E – EMPLOYER FILING ELIGIBILITY

YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS

SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)

Unique Entity ID (UEI):

YES (Single-Establishment Employer is Federal Contractor) YES (Multi-Establishment Employer is Federal Contractor)

YES (Headquarters is Federal Contractor) YES (Non-Headquarters Establishment is Federal Contractor)

YES (One or More Non-Headquarters Establishments is Federal Contractor)

SECTION G – NAICS INFORMATION

541714 - Research and Development in Biotechnology (except Nanobiotechnology)

SECTION H – WORKFORCE DEMOGRAPHIC DATA

JOB CATEGORIES	Race/Ethnicity														Row Total
	Hispanic or Latino		Not Hispanic or Latino												
			Male						Female						
	Male	Female	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	
Executive/Senior Level Officials and Managers	1	2	39	3	10	0	0	1	26	0	3	0	0	1	86
First/Mid-Level Officials and Managers	25	20	371	18	136	0	0	7	307	15	111	0	0	14	1024
Professionals	62	85	606	48	302	2	0	20	765	84	361	3	1	24	2363
Technicians	16	13	57	7	19	1	0	1	51	8	43	1	0	1	218
Sales Workers	1	0	11	0	0	0	0	0	12	0	0	0	0	1	25
Administrative Support Workers	5	13	22	6	4	0	0	1	56	16	13	0	0	4	140
Craft Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Operatives	6	4	10	4	6	0	0	1	3	3	1	0	0	0	38
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2022 REPORTING YEAR TOTAL	116	137	1119	86	477	3	0	31	1220	126	532	4	1	45	3897
PRIOR 2021 REPORTING YEAR TOTAL	85	97	952	69	341	1	0	21	1059	81	416	2	2	38	3164

SECTION I – WORKFORCE SNAPSHOT PERIOD
12/18/2022 - 12/31/2022

SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)

Not Applicable

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SECTION K – OFFICIAL CERTIFICATION OF SUBMISSION

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MA

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02210

CERTIFICATION COMMENTS (optional)

No Certification Comments Provided

CERTIFICATION STATEMENT

"I certify that the information, including any workforce demographic data, provided in this report is correct and true to the best of my knowledge and was prepared in conformity with the directions set forth in the form and accompanying instructions."

Knowingly and willfully false statements on this report are punishable by law, US Code, Title 18, Section 1001.

DATE OF CERTIFICATION

12/5/2023 1:01 PM [EST]

EMPLOYER'S CERTIFYING OFFICIAL

Name of Employer's Certifying Official

Title of Certifying Official

Email Address of Certifying Official

Telephone Number of Certifying Official

PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING

Name of Primary POC

Title and Employer of Primary POC

Email Address of Primary POC

Telephone Number of Primary POC