SEC Form 4	

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number:	3235-0287										
Estimated average	burden										

to Sect obligat	this box if no lo tion 16. Form 4 ions may contin tion 1(b).	-			_	-		rities Exchang	_		RSH	P	Estima		er: (verage burde sponse:	3235-0287 en 0.5				
	(ion 1(b).			Theo	or Se	ection 3	30(h) c	of the	Investr	nent C	Company Act	of 1940	1 1 3 3 4			<u></u>				
1. Name and Address of Reporting Person [*] <u>ITEM SECOND IRR. TRUST FBO</u> <u>ANNE MARIE WESTPHAL u/a of</u>						2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Vertex, Inc. [VERX] Director X 10% Owner										wner				
JEFFREY R. WESTPHAL dated October 5, 2001						3. Date of Earliest Transaction (Month/Day/Year) 03/20/2023									Officer (give title X Other (specify below) X below) 13(D) GROUP MEMBER					
(Last) (First) (Middle) C/O VERTEX, INC. 2301 RENAISSANCE BLVD					4. lf .	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person														
(Street) KING OF PRUSSIA PA 19406						Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
(City)	(St	ate) (Z	Zip)																	
		Table	I - N	lon-Deriva	ative	Secu	rities	s Ac	quire	d, Di	isposed o	f, or E	Benefic	ially C	Owned					
1. Title of Security (Instr. 3) Date (Month/Day/Y					Year) if any		ion Da			ction Instr.		Acquired (A) or (D) (Instr. 3, 4 a		nd 5) Secur Benef			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price	T	Transaction(s) (Instr. 3 and 4)				(
Class A Common Stock 03/20/20						23			S		2,354	D	\$18.25	.255 ⁽¹⁾ 321		21,912		D		
Class A C	ss A Common Stock 03/21/202					23			S		11,379	D	\$18.24	3.246 ⁽²⁾ 3		310,533		D		
Class A Common Stock 03/22/202						23			S		10,533	D	\$18.23	\$18.235 ⁽³⁾		(3) 300,000		D		
		Tal	ble I	I - Derivati (e.g., pι							posed of, convertit				vned					
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. Trans: Code 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration e (Month/Da			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Pric Deriva Secur (Instr.	itive de ity Se 5) Be Fo Re Tr	Number erivative ecurities eneficially wned ollowing eported ansactior istr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares	er						
	n of Respons	ses: umn 4 is a weighted a	avere -	a price These	charos -	uara aal	d in m-	ultipla	trances	tions of	t prices main	from e	18 00 to \$1	8 55						
2. The price	reported in Col	umn 4 is a weighted a umn 4 is a weighted a umn 4 is a weighted a	averag	e price. These	shares v	vere sol	d in mu	ultiple	transac	tions at	t prices ranging	from \$	18.00 to \$1	8.51.						

03/22/2023 /s/ Joshua Levine, as Trustee

** 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.