FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

| OMB Number: | 3235-0287 |
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| Estimated average bu | ırden |
| 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 [*] Harris Gail Block | | | | 2. Issuer Name and Ticker or Trading Symbol <u>Evercore Inc.</u> [EVR] | | | | | | | (Cheo | 5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Owner | | | | | | |
|---|---|--|-----------------|---|--|--------|--|------------------|---------------------------------------|--|-------------|---|--|---|---------------|--|--|-----------|
| (Last) | .ast) (First) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/15/2023 | | | | | | | | | ficer (give title | | Other (s below) | | |
| C/O EVE | ERCORE I | NC. | | | 4. If A | Amendi | ment, Date o | of Origina | l File | d (Month/Da | ay/Yea | ar) | 6. Ind | ividual c | or Joint/Grou | up Fili | ng (Check A | pplicable |
| 55 EAST 52ND STREET | | | | | | | | | | Line) | , | | | | | | | |
| | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reportin | | | | | | |
| (Street) | אסר אי | V 1 | 0055 | | | | | | | | | | | Pers | | | an one rrep | orting |
| NEW YORK NY 10055 | | | | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | |
| (City) (State) (Zip) | | | | | | | | uon | | | | | | | | | | |
| (0.13) | (0) | 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. | | | | | | | | | | | | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secur | ities Acq | uired, | Dis | posed of | f, or | Ben | eficial | y Owr | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | Execution Date, | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A d Of (D) (Instr. 3, | | 3, 4 and Secu Bene Own Follo | | cially 1 | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | Code | v | Amount | t (A) or (D) F | | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | | |
| Shares of Class A common stock, par value \$0.01 per share06/15/2 | | | | | 023 | | | A ⁽¹⁾ | | 1,069 | | A | \$0.00 | 60.00 38,654 | | | D | |
| | | Tal | ole II - | Derivativ (e.g., pu | | | ies Acqu varrants, | | | | | | | Owne | ed | | | |
| 1. Title of Derivative Security (Instr. 3) | ivative Conversion Date Execution Date urity or Exercise (Month/Day/Year) if any | | tion Date, | 4. Transaction Code (Instr. 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 | | De Se (In | Price of rivative curity str. 5) | ative derivative ity Securities | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | | | Amo | ount | | 1 | - 1 | | 1 | |

Explanation of Responses:

1. These restricted stock units will be delivered on June 15, 2024, subject to accelerated vesting in certain circumstances.

Remarks:

<u>/s/ Jason Klurfeld, as</u> <u>Attorney-in-Fact</u>

Title

or Number of Shares

06/16/2023

** 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.

Code

(A) (D)

v

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.

Date

Exercisable

Expiration

Date