SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287							
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	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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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*				2. Issuer Name and Ticker or Trading Symbol Evercore Inc. [EVR]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Carlton Pamela G</u>													ctor	10%	Owner		
(Last)	(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 08/14/2023							cer (give title w)	Othe below	r (specify v)		
C/O EVERCORE INC.				4 If	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable					
55 EAST 52ND STREET					*. In Americanient, Date of Original Filed (Month/Day fear)							Line)					
												Form filed by More than One Reporting					
(Street) NEW YORK NY 10055											Person						
NEW Y	URK IN	r I	0055		10 10	b = 1(a)	Tron		tion Indi	ootior							
				- Ru	Rule 10b5-1(c) Transaction Indication												
(City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to												
		ΙU	satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - Non-Der	vative	Secu	rities Acc	luired	, Dis	posed of,	, or Be	nefici	ally Ow	ned				
1. Title of s	Security (Ins		2. Tran Date		2A. D Execu	eemed ution Date,	3. Transa Code (8)	ction	4. Securities Disposed Of	Acquire	d (A) or	5. An Secu Bene Owne	ount of rities ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
1. Title of S	Security (Ins		2. Tran Date	action	2A. D Execu if any	eemed ution Date,	3. Transa Code (ction	4. Securities Disposed Of	Acquire	d (A) or	5. An Secu Bene Owne Repo Trans	ount of rities ficially d Following	Form: Direct (D) or Indirect	of Indirect Beneficial		
Shares of		tr. 3) ommon stock, pa	2. Tran: Date (Month	action	2A. D Execu if any	eemed ution Date,	3. Transa Code (8)	iction Instr.	4. Securities Disposed Of 5)	Acquire f (D) (Inst	d (A) or r. 3, 4 an	5. An Secu Bene Owne Repo Trans (Instr	ount of rities ficially d Following rted action(s)	Form: Direct (D) or Indirect	of Indirect Beneficial Ownership		
Shares of	f Class A co	tr. 3) ommon stock, pa e	2. Tran: Date (Month	action Day/Year) 4/2023 ative S	2A. D Execu if any (Mont	eemed ution Date, h/Day/Year) ties Acqu	3. Transa Code (8) Code S	v Disp	4. Securities Disposed Of 5) Amount 592	Acquire f (D) (Inst (A) or (D) D D T Ben	d (A) or r. 3, 4 an Price \$136 eficial	.69 5. Am Secu Bene Owne Repo (Instr (Instr	ount of ities licially d Following rted action(s) 3 and 4) 3,041	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership		

(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	y/Year) 8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				Underlying Derivative Security (Instr. 3 and 4)		(Instr. 5)	Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

Remarks:

<u>/s/ Jason Klurfeld, as</u>

Attorney-in-Fact ** Signature of Reporting Person Date

08/16/2023

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.