FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20E 40
Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL						
OMB Number: 3235-0362						
Estimated average burden						
hours por rosponso:	1.0					

Form 3 Holdings Reported

_	Transactions [F	iled pursuant							4					· '	
Form 4 Transactions Reported. 1. Name and Address of Reporting Person* Altman Roger C				2. Issuer	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol Evercore Partners Inc. [EVR]					(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) C/O EVERCORE PARTNERS INC. 55 EAST 52ND STREET 38TH FLOOR (Street)				12/31/2	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2009 4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Inc Line)	X Officer (give title Other (specify below) Executive Chairman and Co-CEO 6. Individual or Joint/Group Filing (Check Applicable Line)						
NEW YORK NY 10055 (City) (State) (Zip)				_)	X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tal	ole I - Non-Der	ivative Se	curi	ties Acc	quired, D	sposed	of, oı	Bene	eficially	Owned					
Date		2. Transaction Date (Month/Day/Year)	Execution if any	2A. Deemed Execution Date, if any (Month/Day/Year)			urities Acquired (A) or Dispose str. 3, 4 and 5)			osed Of	ed Of 5. Amount Securities Beneficiall Owned at 0		6. Owner Form: D (D) or Indirect	Direct II	. Nature of ndirect eneficial wnership		
			,		8)	Amoui	nt	(A) or (D)	Price		Issuer's Fis Year (Instr. 4)	scal (Instr. 4					
			Table II - Deriv	ative Sec								Owned					
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Security or Exercise (Mont		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		I 7. T of S Und	7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownershi ct (Instr. 4)	
					(A)	(D)	Date Exercisable	Expiration Date	n Titl	O N O	Amount or Number of Shares		Transaction(s) (Instr. 4)				
Partnership units of Evercore Lp ⁽¹⁾	(1)	11/20/2009		G ⁽²⁾		28,600 ⁽²⁾	(1)	(1)	of (con sto	ares Class A umon ock, ar lue .01 er are	28,600	(1)	1,131	131,321			
Partnership units of Evercore LP ⁽¹⁾	(1)						(1)	(1)	of (ares Class A imon ock, ar lue	.,140,649		1,140),649	I	Shares hel in trust ⁽³⁾	

Explanation of Responses:

- 1. Evercore LP partnership units are, subject to certain restrictions in the Evercore LP partnership agreement, exchangeable on a one-to-one basis for shares of Evercore Partners Inc. Class A common stock, subject to customary conversion rate adjustments for stock dividends and reclassifications.
- 2. Mr. Altman has made a bona fide gift of these Evercore LP partnership units to the New York-Presbyterian Fund, Inc., an unaffiliated, not-for-profit institution.
- 3. These Evercore LP units are held in trust for the benefit of Mr. Altman's family. Mr. Altman disclaims beneficial ownership of these partnership units, and the filing of this report is not an admission that Mr. Altman is the beneficial owner of these partnership units for the purposes of Section 16 or any other purpose.

/s/ Adam B. Frankel, as 02/09/2010 Attorney-in-fact

** 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.