FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* SCHLOSSTEIN RALPH					2. Issuer Name and Ticker or Trading Symbol Evercore Inc. [EVR]									Relationship of Reporting Person(s) to Issuer (Check all applicable)					
SCHEOSSTEIN KALITI														X	Direc	tor		10% O	wner
(Last) (First) (Middle) C/O EVERCORE INC. 55 EAST 52ND STREET					3. Date of Earliest Transaction (Month/Day/Year) 02/04/2022								X	belov	r (give title Other (s) below) o-CEO/Co-Chairman		specify		
(Street)				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applical Line)					.
NEW YO	NEW YORK NY 10055			_										X	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta	ate) (ž	Zip)												1 0130				
		Table	I - Non-Deriv	ativ	e Sec	urit	ties A	cqui	ired, I	Dis	sposed o	f, or E	Benefi	cially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				2A. Deemed Execution Dat if any (Month/Day/Ye		Date,		Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			d 5)	Securi Benefi	icially d Following	Forn (D) o Indir	n: Direct or ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	e V	A	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		action(s)	(Instr. 4)		(111511.4)
Shares of Class A common stock, par value \$0.01 per share				22	22			F			19,472(1)	D	\$129	.7825	19	96,776		D	
Shares of Class B common stock, par value \$0.01 per share																1		D	
Shares of Class B common stock, par value \$0.01 per share																1		I	Share held in trust. ⁽²⁾
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	/e Conversion Date Execution Date, Transaction or Exercise (Month/Day/Year) if any Code (Instr.				n C r. E 	5. Numb of Derivativ Securitie Acquired (A) or Dispose of (D) (Instr. 3, and 5)	ve (Nes d	. Date E xpiratio Month/D	on D		Amou Secur Unde Deriv Secur	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Cod	ode V (A) (D		Date Exercisab		ıble	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. These shares were surrendered to Evercore Inc. for the payment of taxes in connection with the vesting of previously granted restricted stock unit awards.
- 2. These securities are held in trust for the benefit of Mr. Schlosstein's family. Mr. Schlosstein disclaims beneficial ownership of these securities and the filing of this report is not an admission that Mr. Schlosstein is the beneficial owner of these securities for the purposes of Section 16 or for any other purpose.

Remarks:

/s/ Jason Klurfeld, as Attorney-in-Fact

02/08/2022

** 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.