Harris Gail Block Form 5 February 01, 2019

## 

Reminder: Report on a separate line for each class of

securities beneficially owned directly or indirectly.

#### OMB APPROVAL

FORIV	15								TTTOVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION						OMB Number:	3235-03	62		
Check this box if no longer subject			Washington, D.C. 20549					Expires:	January 3	
to Section Form 4 or 5 obligatio may contin See Instruc	Form ANN ons nue.	OWN	ATEMENT OF CHANGES IN BEN OWNERSHIP OF SECURITIES					burden hou	Estimated average burden hours per response	
1(b). Form 3 Ho Reported Form 4 Transactio Reported	oldings Section 17(a	) of the Public	n 16(a) of the S e Utility Holdin e Investment Co	g Compa	any A	act of	1935 or Section	on		
1. Name and Address of Reporting Person * Harris Gail Block			2. Issuer Name <b>and</b> Ticker or Trading Symbol Evercore Inc. [EVR]				5. Relationship of Reporting Person(s) to Issuer			
(Last)		(Mon- 12/3	3. Statement for Issuer's Fiscal Year Ended  (Month/Day/Year)  12/31/2018  Director Officer (giv				ck all applicable)  10% Owner ctitle Other (specify			
C/O EVERO 52ND STRI	CORE INC., 55 I EET	EAST					below)	below)		
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Reporting  (check applicable line)			
NEW YOR	K, NY 10055						_X_ Form Filed by Form Filed by Person	One Reporting P More than One R		
(City)	(State)	Zip) T	able I - Non-Der	ivative Sec	curitie	s Acqu	ired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Ye	Code	Acquired Disposed	. Securities .cquired (A) or visposed of (D) .nstr. 3, 4 and 5) (A) or .mount (D) Price		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	•
Shares of Class A common stock, par value \$0.01 per share	08/29/2018	Â	G <u>(1)</u>	905	D	\$ 0	43,945	D	Â	

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contained in this form are not required to respond unless

the form displays a currently valid OMB control number.

SEC 2270

(9-02)

### Edgar Filing: Harris Gail Block - Form 5

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	ınt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
	•				(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									A 4	
									Amount	
						Date	Expiration	m: .1	or	
						· · · · · · · · · · · · · · · · · · ·	Date		Number	
									of	
					(A) (D)				Shares	

of D

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
•	Director	10% Owner	Officer	Other			
Harris Gail Block C/O EVERCORE INC. 55 EAST 52ND STREET NEW YORK, NY 10055	ÂX	Â	Â	Â			

## **Signatures**

/s/ Jason Klurfeld, as Attorney-in-Fact 02/01/2019

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* 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).
- (1) Ms. Harris has made bona fide gifts of these shares of Class A common stock to unaffiliated not-for-profit institution.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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