FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PROVAL
OMP Number	2225 02

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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).

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

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Name and Address of Reporting Person*     NOLLI INTELLIGIAN							2. Issuer Name and Ticker or Trading Symbol EVERBRIDGE, INC. [ EVBG ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
MOULINE IMAD							<u> </u>										Direc	tor		10% O	wner	
						- 2 5	O Date of Farling Transaction (Marth (Day))										Officer (give title below)			Other (specification)		
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 10/01/2018									S	SVP & Chief Techn			nology Officer		
C/O EVERBRIDGE, INC.						10/	10/01/2010													8)		
25 CORPORATE DRIVE																						
					_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable							
(Street)																	Line)					
BURLIN	CTON	МΔ		1803												X Form filed by One Reporting Person					on	
DUKLIN	GION	1V17		1003												Form filed by More than One Reporting						
						-											Pers	on				
(City)		(Sta	te) (2	Zip)																		
			Tabl	e I - No	on-Deriv	ative	Sec	uritie	s Ac	quired	l, Di	sposed o	f, or	Bei	nefici	ally O	wne	:d				
1. Title of S	Security (I	nstr.	3)		2. Transa	ction		Deeme		3.		4. Securitie						ount of	6. Own		7. Nature	
	, ,		,		Date (Month/Da	ov/Voor)			ution Date,		Transaction Disposed C		Of (D) (Instr. 3, 4 a					ties cially		Form: Direct (D) or Indirect	of Indirect Beneficial	
(wonth/bay/					ayı ı cai j	/Year) if any (Month/Day/Year)			8)					Own		d Following		(I) (Instr. 4)	Ownership			
											(A) or Price			Repo		ted action(s)			(Instr. 4)			
										Code	V	Amount (A) 01		<u> </u>	Price			3 and 4)				
Common Stock 10/01/20										S <sup>(1)</sup>		3,000	D \$57		\$57.3	3033 214,994		14,994	Ι	)		
			Ta	hle II -	Derivat	tive S	ecur	ities	Δοαιι	ired I	Dien	osed of,	or Re	ane	ficiall	v Owi	ned					
			10	ibic ii -								onvertib					icu					
1. Title of	2.		3. Transaction	3A. Dee	med	4.		5. Nu	mber	6. Date Exercisable			and 7. Title and			8. Pric	ice of 9. Number o		f 10.		11. Nature	
Derivative Security	Conversi or Exerci	ise	Date (Month/Day/Year)	Execution if any	on Date,	Transa Code (				Expiration Date (Month/Day/Year)			Amount of Securities Underlying			Derivative Security (Instr. 5)		derivative		Ownership Form: Direct (D)	of Indirect Beneficial Ownership	
(Instr. 3)	Price of				Day/Year)	8)	msu.											Securities Beneficially				
Derivative							Acquired		Derivative					.	Owned Following		or Indirect (I) (Instr. 4)	(Instr. 4)				
Security					(A) or Disposed				Security (Instr. and 4)			iiisu. s			Reported		11501. 4)					
				of (D)											Transaction (Instr. 4)	(s)						
							(Instr. 3, 4 and 5)										(111501. 4)					
												I A	mount	1								
									i '					or	•							
										Date Expiration			Nur		umber	r						
						Code	l۷	(A)	l (D)	Exercis	sable		Title		hares	1	- 1					

## **Explanation of Responses:**

1. The sales reported were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person.

## Remarks:

/s/ Elliot J. Mark, Attorney-in-

**Fact** 

\*\* Signature of Reporting Person Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$ 

- $^{\star}$  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.