FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.

| Washington, D.C. 20549 | OMB APPRO |
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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: |

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

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

| 1. Name and Address of Reporting Person* GRAYSON BRUNS H | | | 2. Issuer Name and Ticker or Trading Symbol EVERBRIDGE, INC. [EVBG] | | | | | | | | ck all appli | , | | | | | | | |
|---|--|------------|---|-------------------------------|---|-----------------|-------|--|-------------------------|---|--|-------------------|-------------------------------------|---|--|---------|--|---|----|
| (Last) | ` | rst) (| (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 05/20/2021 | | | | | | | Officer below) | (give title | | Other (s below) | specify | | | |
| (Street) BURLIN (City) | IGTON M | | 01803 (Zip) | | 4. If | | | | | | | | 6. Inc Line) X | ′ | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| Date | | | 2. Transa Date (Month/D | Execution Date, | | Code (Instr. 5) | | | 3, 4 and Securiti | | ies Form cially (D) (Following (I) (I | | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | | | Code | V | Amount | (A) o | (A) or (D) Price | | Transac (Instr. 3 | tion(s) | | | `, |
| | | Т | able II - D | | | | | | uired, Di s, options | | | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date Execution Date (Month/Day/Year) if any (Month/Day/Year) | | | oate, | 4. Transa Code (I 3) | | n of E | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | | C | Code | v | (A) | (D) | Date Exercisable | | xpiration ate | Title | Amo or Num of Sha | nber | | | | | |
| Restricted Stock Unit | \$0.00 | 05/20/2021 | | | A | | 1,448 | | (1) | | (2) | Common Stock | 1,4 | 148 | \$0.00 | 1,448 | | D | |

Explanation of Responses:

1. Represents a grant of restricted stock units under the Everbridge, Inc. 2016 Equity Incentive Plan. Each restricted stock unit represents the contingent right to receive, upon vesting of the unit, one share of Everbridge common stock. Subject to accelerated vesting in certain circumstances, the restricted stock units are scheduled to vest last day of the month after the date of the 2022 annual meeting of stockholders of Everbridge, as long as the reporting person remains in the service of Everbridge through the respective vesting date.

Remarks:

Elliot J. Mark, Attorney-in-

Fact

05/24/2021

** 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.

^{2.} Not applicable