| SEC For | m 4 | | | | | | | | | | | | | | | | |
|---|---|--|---|---------|---|----------|-------------------------------------|--|--------------------------------------|--|---|---|--|---------------|--|--|--|
| FORM 4 UNITED STAT | | | | TES | ES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | | OMB APPROVAL | | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). | | | | ed purs | suant to | o Sectio | on 16(| (a) of the Secue Investment C | urities Excha | inge Act of | | SHIP | Estim | | er: 3 verage burder sponse: | 3235-0287 n 0.5 | |
| 1. Name and Address of Reporting Person [*] DAMORE RICHARD A | | | | | | | | cker or Tradin . <u>, INC.</u> [E | | | neck all applie X Directo | cable) or | , 10% Owne | | | | |
| (Last) (First) (Middle) C/O EVERBRIDGE, INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/20/2021 | | | | | | | | Officer (give title Other (specify below) below) | | | | |
| 25 CORPORATE DRIVE, 4TH FLOOR (Street) BURLINGTON MA 01803 | | | | - 4.1 | f Amen | idment, | Date | of Original Fil | led (Month/I | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | |
| (City) (State) (Zip) | | | | - | Per | | | | | | | | son | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | saction | ction 2A. Deemed Execution Da | | | ar) 3. Transacti Code (Ins 8) | Transaction Code (Instr. 3, 8) | | ired (A) or Istr. 3, 4 an | 5. Amount of Securities Beneficially | | Form (D) o | n: Direct or Indirect I nstr. 4) | 7. Nature of Indirect Beneficial Ownership Instr. 4) | |
| 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | ansaction of of ode (Instr. Derivative | | tive ities red sed 3, 4 | 6. Date Exerc Expiration Da (Month/Day/N | ate | 7. Title and Amount 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 Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Restricted Stock Unit | \$0.00 | 05/20/2021 | | A | | 1,448 | | (1) | (2) | Common Stock | 1,448 | \$0.00 | 1,448 | 3 | 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.

2. Not applicable.

Remarks:

| Elliot J. Mark, Attorney-in- | 05/24/2021 |
|------------------------------|-------------------|
| Fact | <u>05/24/2021</u> |

Date

** Signature of Reporting Person

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

 \ast 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.