1. Name and Address of Reporting Person
Dean Alison
C/O EVERBRIDGE, INC.
25 CORPORATE DRIVE, 4TH FLOOR
BURLINGTON MA 01803

2. Issuer Name and Ticker or Trading Symbol
EVERBRIDGE, INC. [ EVBG ]

3. Date of Earliest Transaction (Month/Day/Year)
05/13/2020

4. If Amendment, Date of Original Filed

5. Relationship of Reporting Person(s) to Issuer
X Director 10% Owner
Officer (give title below) Other (specify below)

6. Individual or Joint/Group Filing (Check Applicable Line)
X Form filed by One Reporting Person
Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 3)</th>
<th>2. Transaction Date (Month/Day/Year)</th>
<th>2A. Deemed Execution Date, if any (Month/Day/Year)</th>
<th>3. Transaction Code (Instr. 8)</th>
<th>4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>5. Amount of Securities Acquired Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>7. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Restricted Stock Unit</td>
<td>05/13/2020</td>
<td></td>
<td>A</td>
<td>723 (A)</td>
<td>723 Common Stock $0.00 / 723 Shares</td>
<td>D</td>
<td></td>
</tr>
</tbody>
</table>

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. The restricted stock units are scheduled to vest on the earlier of May 31, 2021 or the end of the month of the 2021 annual stockholders' meeting, 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-Fact 07/31/2020

** 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).


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.