FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	$D \subset$	20540	
vasiiiiiuloii.	D.C.	20049	

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

Name and Address of Reporting Person* Simonson Richard A					2. Issuer Name and Ticker or Trading Symbol EverCommerce Inc. [EVCM]								(Ch	neck all app	ationship of Reporti k all applicable) Director		rson(s) to Is 10% Ov		
(Last)	(Fir	st) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/20/2024								Office below	er (give title v)		Other (s below)	specify		
C/O EVERCOMMERCE INC. 3601 WALNUT STREET, SUITE 400				4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person							
(Street) DENVE	R CC	8	0205		Dul	Form filed by More than One Repor											orting		
(City)	(Sta	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									nded to					
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or I	Bene	eficia	illy Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Executio ny/Year) if any		ution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Inst 5)					d Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A)) or)	Price		action(s) 3 and 4)			(Instr. 4)	
Common Stock 06/20/2					2024			A		20,366(1)]	A	\$0 ⁽¹⁾		56,523		D		
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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			Transaction of Code (Instr. Derivat		rative rities rired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins: 3 and 4)		nstr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nun of Sha	- 1					

Explanation of Responses:

1. Represents an award of Restricted Stock Units ("RSUs"). Each RSU represents a contingent right to receive one share of the Issuer's Common Stock. The RSUs shall vest and settle on the earlier of (i) the day immediately preceding the date of the Issuer's first annual meeting of stockholders following the date of grant and (ii) the first anniversary of the date of grant, subject to the Reporting Person continuing in service on the Issuer's Board as a Non-Employee Director through the applicable vesting date.

By: /s/ Lisa Storey, Attorney-

06/24/2024

in-fact

** 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.