FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C. 20549

**OMB APPROVAL** 

- 1										
	OMB Number:	3235-0287								
	Estimated average burden									
	hours per response:	0.5								

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1(c). S	ee Instruction 1	0.																		
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol  EverCommerce Inc. [ EVCM ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Feierstein Matthew David						2, 7, Commerce me.									Director			10% O		
,														1	Office below	er (give title		Other (s	specify	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)									President						
C/O EVERCOMMERCE INC.					09/03/2024									resident						
3601 WALNUT STREET, SUITE 400																				
-					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														IIIe)	Form	filed by On	e Ren	ortina Pers	on	
DENVE	R CC	8	0205												Form filed by One Reporting Person  Form filed by More than One Reporting					
-				-											Person					
(City)	(Sta	ate) (Z	Zip)																	
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benefi	cially	Own	ed				
1. Title of	Security (Inst	tr. 3)		2. Transac	tion											ount of 6. Ownership			7. Nature	
				Date (Month/Da	y/Year) Execution Date, if any (Month/Day/Year)			Transaction Disposed Of (D) (In Code (Instr. 5)		nstr. 3, 4	and	Beneficially (D		(D) c	or Indirect	of Indirect Beneficial				
								8)							(I) (Instr. 4)		Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or Prio	e		ansaction(s)			`	
G G I						024					0.1(0(1)	+ ' '	<u> </u>	0.25	•			Б		
Common Stock 09/03/2					:024				F		9,169(1)	I	) \$1	0.35 2,2		281,831		D		
																			By	
Common Stock														150,000				Family		
																			Trust	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
				(e.g., pu	ıts, ca	alls, v	warra	ants,	optio	ns, c	onvertib	le se	curitie	s) Î						
1. Title of	2.	3. Transaction	3A. Dec		4.			ımber			isable and	7. Titl			rice of	9. Number	of	10.	11. Nature	
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution D	ion Date,	Transa Code (				Expirat (Month)						vative urity	derivative Securities		Ownership Form:	of Indirect Beneficial	
(Instr. 3)					8)			rities	Underlying Derivative				(Instr. 5)			Beneficially Dir		Ownership (Instr. 4)		
	Security							Acquired (A) or		Secu			ecurity (Instr.		Follo			(I) (Instr. 4)	(111341. 4)	
					Disposed of (D)			3 and 4)			4)			Reported Transaction(s)						
							(Instr. 3, 4 and 5)									(Instr. 4)				
													Amoun	-						
													or Numbe							
					Codo		(A)		Date		Expiration	Title	of	`		1				
						Code V		(D)	Exercisable		Date	Title	Shares							

## Explanation of Responses:

1. Represents the number of shares of common stock withheld by the Issuer to cover the reporting person's tax withholding obligation upon the vesting of Restricted Stock Units granted on March 1, 2022

/s/ Lisa Storey, Attorney-in-

fact

\*\* Signature of Reporting Person Date

09/04/2024

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.