FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

(I) (Instr.

D

Transaction(s

9200

(Instr. 4)

\$0

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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. Name and Address of Reporting Person [*]				2. I	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
Nutton Debi	a			Ev	eri Hold	ings Inc	. [E	EVRI]			, ,			
(Last) (First) (Mic	ddle)	3. I	Date of Earliest Transaction (MM/DD/YYYY)				Director	C.1.1.1		% Owner			
										Officer (gr	ve title below	v)Oti	her (specify l	below)	
7250 S. TENAYA WAY, SUITE 100					5/2/2023										
(Street)				4. I	4. If Amendment, Date Original Filed (MM/DD/YYYY)) 6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line				
LAS VEGAS, NV 89113											X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication										
\Box Check this box to indicate that a transaction was								made pursuant t	o a contra	ct, instructio	on or writ	ten plan			
				that	t is intended	l to satisfy	the a	affirma	ative def	ènse co	nditions of Rule	10b5-1(c)	. See Instru	ction 10.	
			Table I - N	on-Der	ivative Sec	urities Ac	quir	ed, Di	sposed o	of, or Bo	eneficially Owne	ed			
1. Title of Security 2. Trans. 1 (Instr. 3) 1				Execution (Instr. 8) or Dispo			rities Acquosed of (E 3, 4 and 5)))		ollowing Reported Transaction(s) Ownership of			Beneficial		
						Code	v	Amou	(A) o nt (D)	r Price	or Indirect (In (I) (Instr. 4)			(Instr. 4)	
	Tab	le II - Deri	ivative Sec	urities l	Beneficially	Owned (e.g.,	puts,	calls, wa	arrants	, options, conve	rtible secu	urities)		•
1. Title of Derivate Security (Instr. 3)2.3. Trans. Date3A. Deemed Execution Date4. T Execution Date1. Title of Derivative00001. Title of Derivative000		4. Trans. Code (Instr. 8)	rans. 5. Number of Derivative Securities			6. Date Exercisable 7. Ti and Expiration Date 7. Ti Deri			nd Amount of s Underlying ve Security and 4)		derivative Securities Beneficially Owned	Derivative Security:	Beneficial		
	Security						Date		Expiration		Amount or	1	Following Reported	Direct (D) or Indirect	

Explanation of Responses:

(1)

Restricted Stock

Units

(1) Each restricted stock unit represents a contingent right to receive one share of common stock.

Code

Α

v

(A)

9200

(2) Represents restricted stock units to acquire shares of the Company's common stock that will vest on the first anniversary date following the grant date of May 2, 2023. Vested shares will be delivered to the reporting person on the earliest of the following events: (i) May 2, 2033; (ii) the reporting person's death; (iii) the occurrence of a Change in Control (as defined in our equity incentive plans), subject to qualifying conditions; and (iv) the date that is six (6) months following the reporting person's separation from service, subject to qualifying conditions.

Exercisable

(2)

(D)

Date

(2)

Title

Common

Stock

Number of

9200.0

Shares

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address		10% Owner	Officer	Other			
Nutton Debra							
7250 S. TENAYA WAY	X						
SUITE 100							
LAS VEGAS, NV 89113							

5/2/2023

Signatures

/s/ Debra L. Nutton by Todd A. Valli, Attorney-in-Fact	5/3/2023

**Signature of Reporting Person

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).

Date

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 control number.