FORM 4	4
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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

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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 F Nahmad Henry M	2. Issuer Name EVI INDUST			0,	mbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director _X_10% Owner			
4500 BISCAYNE BLVD., SU	3. Date of Earlies 02/24/2020	st Transacti	on (1	Month/Da	y/Yeai	X Officer (give title below) Other (specify below) Chairman, CEO and President				
(Street) MIAMI, FL 33137	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State)	(Zip)	Т	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)	Date (Month/Day/Year)	· · · · · ·	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially Owned Following Reported Transaction(s)		7. Nature of Indirect Beneficial Ownership
		(Wond Day, Tear)	Code	V	Amount	(A) or (D)	Price	(1151. 5 and 4)	or Indirect (I) (Instr. 4)	1
Common Stock, \$0.025 par value per share	02/24/2020		F		5,262 <u>(1)</u>	D	\$ 22.14 (2)	920,509	D	
Common Stock, \$0.025 par value per share								2,838,194	Ι	By Symmetric Capital LLC ⁽³⁾

 Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.
 Persons who respond to the collection of information SEC 1474 (9-02) contained in this form are not required to respond unless

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	on	Numl	ber	and Expiration	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	ities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) o	r						Reported	or Indirect	
						Dispo	osed						Transaction(s)	(I)	
						of (D)						(Instr. 4)	(Instr. 4)	
					(Instr. 3,										
					4, and 5)										
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Excicisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
Nahmad Henry M 4500 BISCAYNE BLVD. SUITE 340 MIAMI, FL 33137	Х	Х	Chairman, CEO and President						

Signatures

**Signature of Reporting Person



Explanation of Responses:

- * 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).
- (1) Represents shares of the issuer's common stock surrendered to the issuer to satisfy the issuer's tax withholding obligation relating to the grant of stock to Henry M. Nahmad.
- (2) Represents the closing price of the issuer's common stock on the grant date.
- (3) Mr. Nahmad is the sole manager of Symmetric Capital LLC. Mr. Nahmad disclaims beneficial ownership of the shares of the issuer's common stock held by Symmetric Capital LLC except to the extent of his pecuniary interest therein.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.