# FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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).

#### 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

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person * Nahmad Henry M					2. Issuer Name and Ticker or Trading Symbol EVI INDUSTRIES, INC. [EVI]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director X 10% Owner					
(Last) (First) (Middle) 4500 BISCAYNE BLVD., SUITE 340					3. Date of Earliest Transaction (Month/Day/Year) 11/30/2020						X Office	X Officer (give title below) Other (specify below)  Chairman, CEO and President					
(Street)				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form fil	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	FL 33137	(State)	(Zip)		т	able I - No	n-D	erivative	Securi	ities Ac	quired, Disp	osed of or l	Reneficial	llv Ow	med		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year	Execu	eemed tion Date, if h/Day/Year)	3. Transaction Code (Instr. 8)		on 4. Securities Acquir (A) or Disposed of ( (Instr. 3, 4 and 5)  (A) or		cquired d of (D)	5. Amount Beneficiall	t of Securities ly Owned Following Fransaction(s)		6. Ownership Form: Direct (D)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	V	Amount	(D)	Price				(Instr	:. 4)		
Common Stock, \$0.025 par value per share		11/30/2020			F		10,201 (1)	D	\$ 33.84 (2)	903,188		D					
Common Stock, \$0.025 par value per share										2,838,19	2,838,194		Ι		By Symi Capi LLC		
Reminder:	Report on a s	separate line	for each class of sec	- Deriv	ative Securi	ties Acqui	Pe co the	rsons wh ntained i e form dis Disposed	no res n this splay	form as a cur	to the collector to the	uired to res OMB con	spond ui	nless	SE	C 147	4 (9-02)
1 Title of	2.	3. Transacti	ion 24 Dooms		outs, calls, w		1					O Dries of	O Niversh	on of	10		11 Motore
	Conversion or Exercise Price of Derivative Security		Execution	Date, if	4. Transaction Code (Instr. 8)	5. Number of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	e an (N	and Expiration Date (Month/Day/Year) Art Ur Se		Title and mount of (nderlying ecurities nstr. 3 and )	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V	(A) (D)	Ex	ate xercisable	Expir Date	ation T	Amount or itle Number of Shares						

## **Reporting Owners**

B 41 0 N 4	Relationships						
Reporting Owner Name / Address	Director 10% Owner		Officer	Other			
Nahmad Henry M 4500 BISCAYNE BLVD. SUITE 340 MIAMI, FL 33137	X	X	Chairman, CEO and President				

### **Signatures**

/s/ Henry M. Nahmad	12/02/2020				
**Signature of Reporting Person	Date				

#### **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 vesting of certain restricted stock awards previously granted to Henry M. Nahmad.
- (2) Represents the closing price of the issuer's common stock on November 30, 2020.
- 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.