FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| 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 |
| \cup | obligations may continue. See |
| | Instruction 1(b). |

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

| Name and Address of Reporting Person* MATZ R KEVIN | | | | | | 2. Issuer Name and Ticker or Trading Symbol EMCOR Group, Inc. [EME] | | | | | | | | | all app Direc | olicable) tor | | erson(s) to I | vner |
|--|---|--|------------------------------------|--|---|---|--|---------------------|--------|---|-----------------------|--------------------------------------|--|--|--|--|---|---------------|------------|
| (Last) (First) (Middle) 301 MERRITT SEVEN | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/10/2023 | | | | | | | | | X Officer (give title below) Other (specify below) EVP - Shared Services | | | | | вреспу |
| (Street) NORWALK CT 06851 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | . Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) (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. | | | | | | | | | | | | | | |
| | | Table | I - N | on-Deriva | tive S | ecui | rities | Ac | quire | d, Di | sposed o | f, or E | Benefic | ially | Owr | ned | | | 1 |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye | | | | Execution Execut | | on Date, | | | | Acquired (A) of (D) (Instr. 3, 4 | | d 5) | 5. Amount of Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | |
| Common | Stock | | | 05/10/202 | !3 | | | S | | | 13,462 | D | \$165.4 | 46 ⁽¹⁾ | 191 | 191,709 ⁽²⁾ | | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution Date, Transaction Number | | | | vative irities iired or osed) r. 3, 4 | Expir (Mon | /Year) | e and int of rities rlying attive rity 3 and 4) Amount or Number | Deri Seci (Insi | rice of vative urity tr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (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 Exercisable | | Expiration Date | Title | of Shares | | | | | | | |

Explanation of Responses:

- 1. The price reported is the weighted average of all the shares sold on May 10, 2023. The shares were sold at an average price of \$165.46, at varying prices in the range of \$165.00 to \$167.73. The Reporting Person undertakes, upon request by the Staff of the Securities and Exchange Commission, the Issuer, or a security holder of the Issuer, to Provide full information regarding the number of shares sold at each separate price.
- 2. Includes shares issuable in respect of restricted stock units.

Maxine L. Mauricio, Attorney-in-Fact 05/11/2023

** 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.