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## 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

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

## 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. Name and Address of Reporting Person*       2. Issuer Name and Ticker or Trading Symbol       5. Relationship of Reporting Person(s) to Issuer         Cornwell Kievdi Don			Table I - Non	-Derivative Securities Acquired, Disposed of, or Bene	eficially Owned
Cornwell Kievdi Don       PJT Partners Inc. [ PJT ]       (Check all applicable)         (Last)       (First)       (Middle)         280 PARK AVENUE       4. If Amendment, Date of Original Filed (Month/Day/Year)       6. Individual or Joint/Group Filing (Check Applicable Line)         (Street)       X       Form filed by One Reporting Person	(City)	(State)	(Zip)		
Cornwell Kievdi Don     PJT Partners Inc. [ PJT ]     (Check all applicable)       (Last) (First) (Middle)     3. Date of Earliest Transaction (Month/Day/Year)     Officer (give title Other (specify below)       280 PARK AVENUE     4. If Amendment, Date of Original Filed (Month/Day/Year)     6. Individual or Joint/Group Filing (Check Applicable Line)	. ,	NY	10017		
Cornwell Kievdi Don     PJT Partners Inc. [ PJT ]     (Check all applicable)       3. Date of Earliest Transaction (Month/Day/Year)     3. Date of Earliest Transaction (Month/Day/Year)     Officer (give title below)     Other (specify below)	280 PARK AVENUE			4. If Amendment, Date of Original Filed (Month/Day/Year)	
Cornwell Kievdi Don PJT Partners Inc. [ PJT ] (Check all applicable)			(Middle)		Officer (give title Other (specify
				0,1	(Check all applicable)

(	2. Transaction Date (Month/Day/Year)	 Transaction Code (Instr.					Securities Beneficially Owned	Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		Code V		Amount (A) or (D) Price		Transaction(s) (Instr. 3 and 4)	(instr. 4)		

 
 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		te Securities Underlying		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	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	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Restricted Stock Units	(1)	03/19/2025		A <sup>(2)</sup>		44		(2)	(2)	Class A Common Stock	44	\$ <b>0</b>	45,583	D	

Explanation of Responses:

1. Each restricted stock unit represents a contingent right to receive one share of Issuer Class A common stock.

2. Represents dividend equivalent rights in connection with the Issuer's dividend that accrue to the reporting person in restricted stock units that vest at the same time(s) as the underlying restricted stock units.

## <u>/s/ David K.F. Gillis</u> <u>03/21/2025</u>

\*\* 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.