FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE	S IN BENEFICIAL	OWNEDSHID
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-	ONID AI	THOVAL
	OMB Number:	3235-028

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

l	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burde	n							
I	hours per response:	0.5							

Name and Address of Reporting Person* Holloway J Gregory					2. Issuer Name and Ticker or Trading Symbol <u>USA Compression Partners, LP</u> [USAC]							Check	ationship of all applical Director Officer (g	ole)	Persor	n(s) to Issue 10% Owi Other (sp	ner	
(Last) (First) (Middle) C/O USA COMPRESSION PARTNERS, LP 100 CONGRESS AVENUE, SUITE 450				C	3. Date of Earliest Transaction (Month/Day/Year) 02/11/2016								X	below) See Remar			below)	
(Street) AUSTIN TX 78701 (City) (State) (Zip)				4	4. If Amendment, Date of Original Filed (Month/Day/Year)							Indivine)	, ·					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Trans Date (Month/I			ite	action 2A. Deemed Execution Date if any (Month/Day/Year)		e, Transaction Dispo			urities Acquired (A) or sed Of (D) (Instr. 3, 4 a				Form: (D) or		Direct II ndirect E tr. 4) C	. Nature of ndirect seneficial ownership nstr. 4)		
								Code V Am		Amount	(A) or (D) Price			Transactio (Instr. 3 an				1130. 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)	perivative Conversion Date Execution Date, Tracecurity or Exercise (Month/Day/Year) if any Co		Transa Code (braction le (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative ve Security		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	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	Amount Number Shares		r (Instr. 4)				
Phantom Units	(1)	02/11/2016		A		60,027		(2)		(3)	Common Units	60,02	27	\$0	60,027		D	
Phantom Units	(1)	02/11/2016		A		15,007 ⁽⁴⁾		02/15/2019 ⁽⁴)	(3)	Common Units	15,007	7(4)	\$0	15,007		D	

Explanation of Responses:

- 1. Each phantom unit is the economic equivalent of one common unit of the Issuer.
- $2. \ The \ phantom \ units \ shall \ vest \ in \ three \ equal \ annual \ installments, \ with \ the \ first \ installment \ vesting \ on \ 02/15/2017.$
- 3. In the event of cessation of the Reporting Person's services for any reason, all phantom units that have not vested prior to or in connection with such cessation of service shall automatically be forfeited.
- 4. The number of phantom units that vest on February 15, 2019 will range between 0% and 200% of the reported number of phantom units generally depending on the Issuer's achievement of certain objective, performance-based criteria during the three years prior to the vesting date. If none or only a portion of phantom units vest as a result of specified performance levels not being met, such number of phantom units that fail to vest will be forfeited. The phantom units shall also vest immediately prior to a change in control regarding the Issuer.

Remarks:

The Reporting Person is the Vice President, General Counsel and Secretary of USA Compression GP, LLC, the general partner of the Issuer (the "General Partner"). The Issuer is managed by the directors and executive officers of the General Partner.

> /s/ J. Gregory Holloway 02/16/2016

** 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.